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PART I.

ORIGINAL COMMUNICATIONS.

I.

Observations on the Properties and Uses of Cathartics. By Anthony Carlisle, Esq. F. R. S. Professor of Anatomy to the Royal Academy, London, &c. &c.

Other causes, in addition to those general causes which I have before mentioned, (No. 2, p. 99,) contribute to vary the operation of cathartic medicines. The doses in which they are taken, the solid or the diluted state in which they are administered, the existing condition of the patient, and the quantity of fluid drank before, or during the Catharsis—all tend to produce differences in the effects of purgative medicines. It is also not unfrequently a point of great moment, to determine whether purgatives should precede other remedies, or be employed after them. For example, in cases of foulness of the alimentary passages, accompanied by a dangerous fulness of blood, it may be a question whether bleeding should go before Cathartics or follow them; and upon a judicious and steady decision in such cases, the life of the patient will often depend. Corpulent persons, beyond the middle age, attacked by carbuncle, sphacelating inflammation, or threatening of apoplexy, may be lost before purgatives can remove the offending matter, unless the sanguineous system be first sufficiently unloaded. But where a gangreneous erysipelas originates from what is called a surfeit, the emptying of the alimentary passages, and the correcting fermentations in the stomach or bowels, are essential points; and the vascular system must be left to the indirect operation of purgative depletion, of abstinence, and of suitable correctives, such as the alkalies when acidity pervades the stomach.

Rhubarb appears to act chiefly upon the stomach, and upon the upper portions of the small intestines. When used for the removal of sick head ach, or ingesta, it seems to me to operate most effectually in the form of powder, which should be mixed at the time of its being taken; because, when allowed to infuse itself in watery mentrua, it loses much of its activity. Rhubarb acts more effectually upon the stomach when united to ipecacuanha; and to the stimulant aromatics, such as pepper or ginger. I believe that a dose of fifteen grains of powdered rhubarb, one grain of powdered ipecacuanha, and five grains of ginger, is generally effectual in adult persons. If, however, the stomach should be invaded by acidity, calcined magnesia should be employed, in doses of forty grains, to be reiterated every two or three hours, until the acidity is corrected. In these instances the patients should drink little, as excess of fluid favours the acid fermentation; and sugar or syrup should be avoided. With becoming respect for my Brethren, and for their established usages, I cannot avoid blaming the frequent practice of joining syrups, and other saccharine matters, with nauseous drugs. If the intention be that of rendering medicines more palatable, I think the purpose is very doubtful; but where the disorder in question is connected with acidity in the first passages, saccharine matters become fuel to the fire. Disorders of the stomach, of the biliary system, and of the upper portions of the intestines, are seldom restricted to those particular parts. They often depend upon obstructions in the inferior bowels, or in their turn cause obstructions in those viscera. The stomach is always disordered when the functions of the liver are deranged. Again, the state of the mind, the condition of the sensorium, and of the whole nervous system, affect the stomach and bowels, and render them more or less susceptible of Catharsis. The secretions and the discharges of the liver are also affected by the sensorium, and by the passions. Sudden and violent passions occasionally induce a bilious diarrhœa; but, in general, all the distressing passions, as well as bodily pain, are productive of torpid bowels, and which require to be watched, since the neglect of those evacuations often lead to serious disorders, both mental and corporeal.

The natural source of Catharsis is, doubtless, the liver; and upon the skilful management of this pharmaceutical organ, the health of the feeble, the sedentary, the studious, the distressed, the infant, and the aged, will often depend.

Mercurial preparations especially influence the flow of the bile into the intestines: they seem to induce a discharge of bile sooner than might be expected, from the circuitous route of absorption and sanguineous circulation; but, how they act so speedily, and what physical connection subsists between the

biliary discharges and the presence of mercury, are desiderata which exclude even conjecture. Calomel and the blue pill are the most usual internal mercurials employed at present. Calomel has a direct purgative power, as a metallic salt; and it operates powerfully in the large intestines. Calomel disorders the digestive powers of the stomach; and, in debilitated persons, the frequent employment of it sinks the strength, and provokes hæmorrhoids. The blue pill consists of finely comminuted globules of mercury, whose surfaces are partly oxydized: it seems to have no intrinsic purgative quality, but to act indirectly by exciting the flow of that natural intestinal stimulus the bile. It seldom induces a watery or exhausting Catharsis, given in doses of five grains to adults for three successive nights, or alternate nights, it usually induces a copious flow of the bile, and a large and well-conditioned evacuation of the bowels. It does not seem to impair the digestion; and the natural stimulus which it calls forth appears to cleanse the whole alimentary tube, without leaving a propensity to costiveness. The Profession are indebted to Mr. Abernethy for the present general use of this valuable medicine. That grave men should violently persist in directing large doses of Calomel, (and I consider any dose above four grains to be large,) and order these doses to be daily reiterated in chronic and debilitated cases, is passing strange. Men, starting into the exercise of the Medical Profession from a cloistered study of books, and from abstract speculations—men, wholly unaware of the fallibility of medical evidence, and unversed in the doubtful effects of medicines—may be themselves deluded, and delude others for a time; but when experience has proved their errors, it would be magnanimous, and yet no more than just, to renounce both the opinion and the practice.

Soho Square, Feb. 4, 1814.

(To be continued.)

II.

To the Editors of the London Medical Repository.

Gentlemen,

Encouraged by your liberal, yet not undeserved, remarks on the importance of the Veterinary Art, I send you two cases of Rabies Canina, which have fallen under my notice during the last year. They are selected from others, as containing the marked characteristics of the disease; yet accompanied by symptoms which would probably deceive the inexperienced observer. Should you deem them worthy of insertion in your

valuable Repository, I shall be happy to submit some others to your inspection, with a few cursory observations on the history of the disease.

I am, Gentlemen, &c. W. YOUATT*.

3, *Suffolk Street*, 11*th Jan.* 1814.

CASE I.

Mr. G——'s Poodle was, on January 16, bitten by a dog, which died, decidedly, rabid.

Feb. 19.—He was observed to be exceedingly enraged at some imaginary object in an opposite wall. He fixed his eyes on the middle of the wall, and barked, incessantly, more than two hours. This was succeeded by dulness and depression of spirits. Being put under our care, he scarcely noticed the departure of his young master, to whom he was much attached; and at whose leaving him, he always used to bark violently. He ate any thing which was given him: swallowed without difficulty; was perfectly tractable; and offered his paw, when caressed. The lower jaw was very slightly dependent.

20.—Dull, but occasionally barked at any noise. Perfectly tractable. A peculiar wild, anxious look. Eagerly lapped water, yet swallowed very little. Refused his food. Eyes frequently closing, and head drooping. A frequent spasmodic motion of the head. Earnestly watched the nails in the partition of the stall, and sometimes snapped at them. Very restless. Jaw more dependent; his bark not changed. A stick violently enraged him. Made frequent attempts to get at a mare, which stood in the next stall, but fawned upon me; gave me his foot, and attempted to rear himself on my shoulders.

21.—The spasms of the head more frequent and violent. Thirst extreme: plunged his nose into the water: yet, apparently, could not swallow. Breathing laborious. Lower jaw completely paralytic. Less sensible to caresses, yet no disposition to fierceness, except that he once endeavoured to spring upon me. Unable to bark, but made a peculiar deep, harsh, hollow noise. Very weak, especially in the loins. At 5 o'clock the next morning he died.

On dissection, the fauces and œsophagus were found unaffected. The mucous membrane of the trachea presented a beautiful appearance, in the ramifications of its distended vessels. The lungs highly inflamed; the right lung peculiarly so. The ves-

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* We are pleased to have it in our power to lay such cases as those of Mr. Youatt before the Profession; being convinced, that much elucidation of the pathology of the disease as it appears in men, may be expected from a distinct exhibition of its symptoms in quadrupeds. EDITORS.

sels of the outer coat of the stomach turgid. The cardiac portion of the villous coat of the stomach generally inflamed; no patches. The stomach contained a considerable quantity of greenish-brown thick fluid. The duodenum and jejunum considerably inflamed; but the inflammation was gradually lost about the middle of the ileum.

Case II.

March 10.—Mr. H——'s Spaniel was observed to snap, seemingly in play, at the feet of several persons. In the evening, becoming more troublesome, his master endeavoured to turn him out of the room, when he bit him, another gentleman, and a dog which lay quietly by the fire.

11.—Quietly followed his master to our house; perfectly docile; eager to be caressed; but once suddenly snapped at the servant. To a common observer he was in perfect health, except that his eyes occasionally closed, and his head drooped; there was some anxiety in the countenance; and he, now and then, earnestly watched some imaginary object. He weighed about 12 lbs.: took ℥ v of blood from him.

12.—An evident amendment: ate his food heartily; less anxiety in the countenance, but some dulness: his eyes not closing, nor his head drooping so often, yet occasionally watching some imaginary object. Turned from a stick presented to him, and at which he, yesterday, eagerly snapped. Very sensible to caresses: bled him to the amount of ℥ iv.

13.—In the morning he ate and drank heartily; was gentle and tractable; every symptom very slight: but, towards evening, the peculiar look, the eager watching of something imaginary, the drooping of the head, and closing of the eyes, were more marked than ever. A considerable spasmodic affection of the head and neck; the breathing difficult, attended with a husky grating sound. Eagerly seized his meat, and hid it carefully; lapped his own urine.

14.—Very early in the morning took away ℥ iv of blood: he fainted; was afterwards unwilling to move. Inattentive to surrounding objects; except that on being repeatedly called, he faintly wagged his tail. About 5 in the evening, he barked two or three times loudly, and died. The bark was unchanged.

On dissection, the trachea and œsophagus presented no morbid appearance: the lungs were slightly inflamed: the tongue and fauces unchanged. The villous coat of the stomach had a few of the rugæ redder than the others. The inflammation appeared rather in lines, than spots or patches. The pyloric orifice of the stomach was choked with hair, hay, and other indigesta. The mucous coat of the intestines slightly inflamed, but the inflammation gradually subsided, and was lost in the ileum.

III.

Cases of Tetanus. By Nodes Dickinson, Surgeon, Granada.

Case I. Tetanus from a Wound.

On the 21st of April 1809, a negro, 12 years of age, by treading on the fragment of a glass bottle, cut his foot in a longitudinal direction between the flexor tendons.

In eighteen days from the accident, he was seized with the symptoms of tetanus.

The spasmodic contractions of the muscles of the neck and back, the pain at the scrobiculus cordis, profuse perspiration, frequent pulse, violent agitation upon every attempt to swallow —the general characteristics of this dreadful affection—together with the jaw nearly locked, were, in this case, as violent as I had observed on any previous occasion.

At the first inspection, on the 9th of May, the cut appeared inflamed, and the edges of the divided integuments swollen, with much tension over the sole of the foot. The wound was enlarged by a crucial incision, and the application of a bread and milk poultice directed.

The subject of this case recovered within four weeks from the accident, and about a fortnight from the period of our first visit.

The means employed were—calomel combined with opium, mercurial friction, wine, two blisters early in the disease, and, latterly, the cold affusion: but, not until the more formidable symptoms had begun to give way.

From the 9th to the 18th of May was exhibited 240 grains of opium, and one half that quantity of calomel in combination. The patient was allowed during the same period the free use of Madeira, which, together with the opium, never, at any time of their exhibition, produced the slightest apparent affection of the brain, or increased action of the vascular system. He had rubbed into his thighs and back of the neck two ounces of strong mercurial ointment; nevertheless, the tetanic symptoms did not appear to diminish, until the mercury had begun to manifest itself in the salivary glands, with a sudden appearance of diarrhœa; which was succeeded by a gradual and permanent relief of symptoms.

REMARKS.

The Tetanus which supervened to the Popliteal Aneurism, (*Vide* Repository, No. 2, p. 113,) seemed to originate from some peculiar irritation induced upon an extensive ulcerated surface, for such the open aneurismal sac had become;

while, in the case just related, the same description of disease was occasioned by a very trifling cut.

By what law of the animal œconomy the accession of tetanus is determined — whether as arising from cold or other general causes; or in the cases of different kinds and degrees of local injury, seems inexplicable. The circumstances of age, sex, habit, or previous state of general health—modes of living —seasons, or situations—have not appeared to me to influence its occurrence, or to determine any thing respecting its character of mildness or severity, in any case with which I have been acquainted. Colour has been supposed to possess some peculiar influence; and negroes, it is to be observed, were the subjects of the cases here referred to, with the exception of Mr. Simpson; and have been usually considered as more liable to tetanus than whites—many more instances of this disease happening among them. But, it must be remarked, how much more exposed these people are to the exciting causes of this affection, especially to wounds in the feet, from which tetanus probably arises in a great majority of cases. Therefore, cæteris paribus, perhaps negroes are not more liable than those of a different complexion.

The climate of the West Indies has also been considered to possess some share in giving occasion to tetanus, from its much greater frequency in hot than in temperate or cold regions. But it is on this occasion well to consider, that the class of persons most liable to the disease in hot countries, are more particularly so from the circumstance of their exposure.

Negroes never are accustomed to wear any kind of defence for their feet; whereas a similar exposure never occurs to the white inhabitants of these colonies. In cold climates, almost every one, even the most wretched, provide themselves with some means of preserving their feet from injuries during labour in the field, or in travelling.

Seasons, and even particular situations, as well as climate and the peculiarity from colour of the skin, have been each of them considered to influence this dreadful disease, but not under the authority of sufficient evidence upon which to found any useful practical conclusion; at least, so far as I am able to judge.

As the causes, which render particular individuals liable to tetanus from injuries or exposures which others bear with impunity, are by no means obvious, or capable of being accounted for on any known principle; we are obliged to have recourse to a certain idiocyncrasy of constitution, which, although not resolvable by any difference of known temperament, appears to exist, however, as a fact, without its nature being ascertained.

The most commonly reputed occasional cause of Idiopathic Tetanus has already been referred to an exposure to cold while under the influence of heat and profuse perspiration and the operation of such exciting cause was pretty manifest in the following Cases, whether of fatal or fortunate termination.

Cases of Idiopathic Tetanus, which terminated fatally.

1. A black child, eight years of age, from exposure to cold, was seized with tetanus, which terminated fatally within fifty hours.
Treatment. Cold affusion, and laudanum.

2. A negro, twelve years old, was taken with the same disease as the foregoing, and from the same cause. This case terminated in death within twenty-two hours.
Treatment. The warm bath, and laudanum.

3. A negro, about seventeen years old, was afflicted with tetanus from exposure to cold, which ended fatally in about seventy-two hours.
Treatment. The vegetable fixed alkali, and laudanum.

4. A black woman was seized with tetanus soon after delivery, of which she died in the fifth day of the disease.
Treatment. Blisters, mercurial friction, and laudanum.

5. A negro boy, about twelve years of age, was seized with tetanus, in consequence of exposure to cold, which terminated fatally within three days.
Treatment. Cold affusion, with laudanum and wine.

6. A young black man, twenty years old, had tetanus from exposure to cold. In this case the patient recovered, apparently, from the tetanic symptoms; was much reduced in strength, and died rather suddenly some weeks after the spasms had entirely left him.
Treatment. Calomel with mercurial friction.

Cases of Idiopathic Tetanus, which terminated in recovery.

1. A negro boy, about fourteen years of age, was attacked with the symptoms of tetanus after exposure to cold.

In this case, the purgative plan of treatment was pursued, from its apparent success in the case of tetanus from a wound, first mentioned in this paper. Calomel combined with jalap, and occasionally castor oil, were given to bring on a gentle diarrhœa, which was kept up for some time; under which, the symptoms gave way gradually, and the youth perfectly recovered.

2. A young negro girl was attacked with tetanus, as was supposed, from exposure to cold. The cold affusion, and large doses of laudanum with wine, were given during the first twenty-four hours, without any sensible benefit. Afterwards, the purgative plan was adopted, on the ground of former experience already noticed. She took such quantities of calomel with jalap daily, as kept up a moderate catharsis; and from this period her amendment became daily more and more evident, until her ultimate recovery.

3. An elderly negro man was seized with tetanus, from exposure to cold and moisture, who at the same time laboured under Anasarca. He completely recovered, under the treatment which was employed in the preceding cases.

4. A negro, about forty years of age, was taken with tetanus, occasioned by exposure to cold; and recovered, after a while, by the use of laudanum in the quantity of two ounces within the twenty-four hours.

In these cases, as in No. 1, tetanus from a wound, the free exhibition of wine and opium never occasioned any apparent disturbance of the head, nor of the heart and vascular system; which seemed, as it were, insusceptible of their peculiar effects, when taken in excess. Neither did they often evince any power over the violent spasmodic contractions, which constitute the symptoms of this disease.

The external injuries most commonly followed by Tetanus, may perhaps be pretty accurately arranged in the following series.

1. Punctured wounds, especially such small punctures in the feet, and between the toes, as are accidentally occasioned by splinters of wood, thorns, or iron nails, &c.

2. Lacerated and contused wounds of the same parts, such as are sometimes the consequence of heavy weights violently impressed, or of carriage wheels passing over the feet, tearing and bruising the toes.

3. Cuts of the same parts with fragments of bottles, pieces of stones, shells, &c.

4. Wounds of the same parts inflicted by sharp instruments.

5. Irritable ulcers of the legs, feet, and toes, howsoever these may have been originally produced.

6. Wounds of the scalp, and tendinous parts, whether simply incised, lacerated, or contused.

7. Wounds produced by surgical operations.

The following exhibit some examples of the supervention of tetanus to local injuries, from the observation of which the preceding series has been arranged. These cases bear, however, a very small proportion to the number and variety of accidents sustained within the period of their occurrence, which were not succeeded by that dreadful affection.

CASES of Tetanus from Wounds which terminated fatally.

1. A negro man suffered amputation of the hand, in consequence of its being dreadfully shattered by an explosion in blasting rocks. The stump was nearly healed, when he was seized with the most violent symptoms of tetanus, and died on the third day. Treatment—Laudanum and electricity.

2. A negro, about 15 years of age, was seized with tetanus, which he attributed to a very severe blow on the back of the neck. Although it was not attended by any external wound or injury of the part, as was manifest on dissection. This case ended fatally within a few days. Treatment—as in the preceding case.

3. A sailor negro was seized with tetanus, from a contused wound of trifling appearance and extent, over the right parietal bone. This case terminated fatally in three days: the subject had, however, laboured under the disease 24 hours before professional assistance was given. Treatment—mercurial friction, and one or two doses of purgative medicine.

4. A negro man, about 30 years of age, received a contused and lacerated wound in the ball of the thumb, which appeared to be doing well, until he was advised by his countryman to apply to it strong beef pickle. In consequence of this, the wound became much inflamed, opened afresh, with the edges considerably retorted. The symptoms of tetanus soon after seized him, and he died in 36 hours. Treatment—laudanum in large and frequently repeated doses.

5. A negro, 35 years of age, was seized with tetanus, in consequence of a punctured wound in the ala nasi, inflicted with the point of a penknife. This case terminated fatally within three days. Treatment—Cold affusion and laudanum.

6. A negro boy was attacked by the symptoms of tetanus

supposed to have been occasioned by a small ulcer on the shin of long standing. He died within 36 hours. Treatment—laudanum, as in the preceding cases, combined with wine.

7. A negro, about 17 years old, was seized with tetanus in consequence of a contused and lacerated wound of the great toe, occasioned by a heavy wheel passing over it. This case terminated fatally within 48 hours. Treatment—cold affusion, laudanum and wine.

8. A negro woman was seized with tetanus, in consequence of a wound of the toe, occasioned by a horse running over her: it was so much contused and torn, as to be nearly detached; which determined its immediate removal from the foot. She died on the following day. Treatment.—Laudanum was given in large doses; and purgative medicine advised; but there was scarcely time for their exhibition.

9. A stout young negro was suddenly seized with the most violent symptoms of tetanus; for which no cause could, at first, be assigned. The mischief was, however, traced to a punctured wound between the toes, inflicted ten days before by a splinter of wood. The symptoms were of uncommon severity; and he died within 48 hours. Treatment—Cold affusion, laudanum, and wine. Purgative medicine was advised; but the case was fatal before it produced any effect.

Cases of Tetanus from Wounds, in which the Patient recovered.

1. The first case of this class has already appeared, being that, from the fortunate termination of which, we have been since led to pursue the purgative plan of treatment.

2. A negro woman, 40 years of age, was seized with tetanus, in consequence of a punctured wound between the toes. She was treated on the purgative plan immediately; and finally recovered.

3. A negro man, about 30 years of age, received a punctured wound between the toes, inflicted by a rusty nail. This case was treated as the preceding, and with the same final issue.

4. A negro boy, about 14 years of age, was seized with tetanus, attributed to an irritable small ulcer on the shin. This case was treated with large and frequently repeated doses of laudanum, and did well. The first exhibition of the medicine gave so much relief, as occasioned it to be followed up at the patient's express desire.

It may be observed generally of the foregoing cases, arising from external injuries, that the period between the time of the infliction of the wound, and the appearance of the symptoms of tetanus, varied little from eight to fourteen days. Occasionally, the hurt had caused so trifling, if any, alarm, or even common attention, as to have been scarcely remembered, instead of being referred to as the exciting cause of so much subsequent mischief.

The general state of health within the same period seems to have been usually undisturbed; or, at least, not in so remarkable a degree as to produce any complaint, or receive detection upon the most attentive enquiry.

It was remarked elsewhere, that in the cases here adduced, the symptoms characteristic of tetanus were violent in degree: although the jaws were seldom so completely closed, until toward the unfavourable terminations, as to preclude the possibility of introducing liquid food and medicine.

Under the term purgative plan, is to be comprehended the frequent exhibition of some one or other of the cathartic class of medicines; commonly jalap combined with calomel; castor oil, or the neutral purging salts, in such quantity and frequency as to induce and keep up a moderate degree of diarrhœa. For example: from four to six stools daily, until the symptoms began to subside. The nourishment in the mean while consisting of broth, and occasionally wine, with a view to the support of the patient's strength.

I know not of any description of wound that is intitled to be considered as offering exemption from the risk of being succeeded by tetanus, from the greatest injury of this kind to the least: whether lacerated gun-shot wound, violent contusion, great operation, the most trivial clean cut, almost imperceptible puncture, or trifling sore.

It is deserving regard, that, on the other hand, no description of wound can, a priori, be determined as certain to be followed by tetanus, which arises in these cases from causes concerning the nature and mode of action of which we are altogether in the dark.

That wounds should be more or less likely to be succeeded by tetanus, as they have been more or less important in themselves, has at times, and within my own experience, deterred some practitioners from operating in this climate, in cases which otherwise required, and were especially susceptible of, relief from surgery. The risk, however, of any particular class of external injuries, in a greater degree than another, has been stated in the series given above in favour of those wounds incurred by chirurgical operations: as they have been found less frequently than most others the occasion of tetanus.

The following cases are submitted with a view to evince, that if wounds of every description are liable to be and are too often succeeded by tetanus in the West Indies, nevertheless no class of external injury is necessarily followed by attacks of that disease. The evidence of such examples may be presumed to have weight, as they have occurred at the same time, and in the same situation with most of the cases of tetanus noticed in this communication.

1. Extirpation of the Testicle.

Thomas Newingham, a private belonging to the 90th regiment, made a rude and unsuccessful attempt to castrate himself, but only succeeded by inflicting a lacerated wound in the scrotum, so as to expose the tunica vaginalis of the right side. The testicle being however returned, and the unequal edges of the ragged external wound brought as nearly into contact as circumstances allowed, went on very well towards a perfect cure; though a considerable degree of inflammation had intervened. He now deserted from the hospital, and was not brought back for some days, when he exhibited a second attempt, which had been made two days prior to his apprehension, with the intent to extirpate the testicle of the left side. To accomplish this purpose, he had sharpened a fragment of the bowl of a tobacco-pipe; and after drawing together the lower folds of the relaxed scrotum, made a complete excision of the part; through the aperture of which, he had endeavoured to force the testicle.

I found him, when brought back to the hospital, with the testis protruded through this wound in the scrotum; the tunica vaginalis divided, and in a state of deep inflammation approaching to gangrene; so that no prospect appearing to authorize an attempt to reduce with safety this mass of disease, I deemed it most adviseable to finish what this man had commenced upon himself, and extirpated the testicle. The patient perfectly recovered from the effects of the operation, and his own preceding acts of violence. On examining for the testicle of the right side, it could not be found. Had the injury sustained in the first instance occasioned its absorption?

I have lately examined this man, but cannot discover any vestige of gland, or spermatic cord.

2. Wound of the Arm.

The subject of this accident, from his being intoxicated at the time, could not determine, but supposed the wound to have been inflicted with a piece of glass. The cut was about four inches in length, extending from below the internal condyle of the humerus obliquely upwards, so as partially to divide the biceps,

and wound the artery in a longitudinal direction, for the extent of two tenths of an inch.

The vessel was detached from its connection to such an extent only as allowed the passing beneath it of two ligatures. These were tied, one above, the other below the wounded aperture, and the intermediate portion divided.

In thirteen days the ligatures came away, and every thing wore a favourable aspect; but in two days afterwards, hæmorrhage recurred. The wound had fallen into a state of ulceration, and had begun to assume altogether an unhealthful appearance.

In these circumstances it was judged expedient to secure the artery higher in the arm; and this being effected by a single ligature, the wound healed, and the case did well within a reasonable time.

3. Gun-shot Wound.

Lieutenant A. of the navy, being engaged with the enemy, received a shot beneath the clavicle, which lodged under the inferior angle of the scapula.

It had made a considerable wound at the place of its entrance; and required a pretty large and deep incision to procure its exit—for it was an iron ball of one pound weight.

This gentleman recovered within a very short period.

The following additional examples, given in the leading points only, will further illustrate the previous remarks.

4. A case of wounded scalp with fracture of the os frontis, which happened about the same time with the case of tetanus, which terminated fatally from a much slighter injury of like kind, did remarkably well.

5. A case of severe and complicated injury.—The scalp and right parietal bone were completely cut through by a hatchet; the principal extensor tendons of the left hand were divided near the wrist; and the integuments thrown back so as to lay open and expose the joint. The extensor tendon of the middle finger of the other hand and neighbouring parts were likewise separated, and the joint exposed; and there was also a deep muscular cut in the right arm down to the ulna. This case did well in a reasonable time.

6.—A case of wound, in which the muscles were divided down to the bone of the arm, and a large and deep transverse incision upon the vertebræ in the back of the neck, likewise did well.

7.—A case of compound fracture of both bones of the leg also did well in a short time.

To these instances, in illustration of the proposition that no kind of wound, however severe, is at any time necessarily followed by tetanus, although many of much less apparent moment too frequently are succeeded by that disease, it may be proper to add the success with which operations have from time to time been performed, (Mr. Simpson's case, related in page 109, No. 2, and the case of tetanus which succeeded to the amputation of the hand, offering the only exceptions to this view of the subject.) Among the examples of this kind, are to be enumerated many cases of amputation—of paracentesis of the abdomen—of the operation for hydrocele by injection—of the employment of caustic in cases of stricture of the urethra, &c. in some of which, the supervention of tetanus in this climate has been frequently apprehended; and assuredly not without some ground, as we perceive it to arise in consequence of injuries apparently of much inferior moment.

My present object extending no further than to give some general remarks concerning tetanus, which I have been led to make from the occasional contemplation of such cases as have occurred to my observation; it is not necessary to advert to the course which has been adopted by different practitioners in their treatment of this painful and fatal affection, any further than as my own practice has been governed thereby.

I may, however, request permission to state, that neither opium, nor wine, nor the cold affusion, nor mercury, otherwise than as connected with its action on the bowels, nor any other amongst the numerous means I have tried on the authority of others, have been productive of much eventual good. A recovery, it is true, happened in one of the cases noticed, in which nothing but laudanum was used; and the instance has therefore been recorded. I must also remark, that fatal terminations have disappointed the confident reliance placed on the purgative plan. These instances of failure have also been recorded, because the object has been, exclusively, the investigation of truth.

It nevertheless occurs to me, in such a view of the whole subject as my experience permits, that if the cases of failure, in which the purgative plan was had recourse to, were accurately analyzed, some error might be found justly attributable to certain circumstances not chargeable altogether to the failure of the plan of treatment itself: while in many cases of recovery attributed to opium, or bark, or the cold affusion, or to the mercurial action, the state of the bowels, both previously to, and during the progress of, the disease, upon which a great deal might possibly have depended, was, perhaps, entirely overlooked, although of chief agency in the successful issue of such cases.

In the first case recorded of tetanus from a wound, in which the patient fortunately recovered, our trust had been reposed in the application of the cold affusion, wine, and opium, combined with calomel. It was neglected to be mentioned, that in consequence of costiveness, an aperient medicine was given, which seems to have called forth the purgative operation of the mercury; certainly, the symptoms were rather on the increase than otherwise, until the diarrhœa came on, and which it was somewhat difficult to keep within moderate limits, when the worst symptoms manifestly gave way, and thus laid the foundation of a hope in future, upon which was grounded the subsequent practice in Numbers 1, 2, and 3, cases of idiopathic tetanus, which ended in the patients' recovery; and also in Numbers 2 and 3 of tetanus from wounds, of like happy termination.

The several remedies advised by a great number of eminent authorities, have manifestly failed in as great a proportion in their practice as in that here detailed; and in some instances in much greater proportion.

Lately looking into some of these authorities for the first time, I perceive the purgative practice recommended among others, and sanctioned by fair evidence of its success; while in certain cases of recovery stated to have taken place on other grounds, the peculiar condition of the bowels, whether opened by accident or design, seems to have contributed no small share towards the fortunate result.

Tetanus is unquestionably one of the greatest opprobria of medicine. Dr. James Clarke has observed, that "tetanus proceding from a læsion of nerves or tendons, has, from my own experience, and that of all my medical acquaintance in the West Indies, resisted every remedy hitherto tried, having always proved fatal."

This assertion, derived from an extensive experience, affords an apology for every attempt to improve our acquaintance with a morbid affection of such fatal character.

Incompetent as I confess myself to be for forming an accurate judgment upon the subject; I may yet, I hope, be allowed to observe, that we are less capable of justly appreciating the value of any individual means for the relief of this disease, from the common employment of such numbers of remedies, of widely different operation, at the same moment, in one and the same case. Possibly in a disease so painful and of such sudden fatality, this employment of several remedies at once has arisen from the hope of greater efficacy from their combination; or from the superior action of some one of the compound, in the event of the failure of the rest. But this method of treatment, I fear, has often perplexed and confused the judgment; and

has probably, on many occasions, defeated its own good intention.

Another remark, which I venture to submit to you, arises out of an opinion I have been at times inclined to think well founded; namely, that the few cases of recovery mentioned in the preceding details, ought to have been considered, rather as affording examples of the effectual power of the animal œconomy exerted for its own preservation, than as adducing demonstration of any success justly ascribable to the means employed. Were this proved to be the true state of the case, rather than the mere suggestion of a loose opinion, it would go far towards recommending forbearance in the application of any means while these remained, at least, of questionable effect.

As the purgative plan of treatment has appeared to me to have hitherto answered better than any other, I submit, with every deference, the further consideration of this interesting subject, to those, whose opportunities for observation are more extensive than mine*.

IV.

To the Editors of the London Medical Repository.

GENTLEMEN,

If you think the subject of the following note of importance sufficient to hold a place in your Journal, I shall be obliged to you to give it an early insertion.

I am, &c. PHILALETHES.

In the last Number of the Edinburgh Medical Journal, appeared 'A Sketch of the Life and Writings of the late Mr. Gibson of Manchester.' It contains a vehement attack upon the professional character of the late Mr. Saunders, which, if

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* We have lately been informed, on high authority, that purging has been employed very energetically, and with the most unequivocal success, in one of our largest naval hospitals, in cases of Tetanus. The subject is of the greatest importance; and we cannot doubt that the Profession will feel indebted to Mr. Dickinson, not only for the information he has given, but for exciting an investigation that may lead to the most valuable results.—EDITORS.

it be not well founded, the writer, Mr. Wardrop, has lamentably committed his own; for, a more arbitrary condemnation, with less evidence of justice, I do not remember to have met with. But Mr. Saunders's friends are numerous and respectable enough to protect his character from assault. I profess neither ability nor inclination for controversy. It is enough to rouse the feelings of all generous-hearted men to know, that he, as well as Mr. Gibson, has been called away to a higher tribunal. Had he been alive, the charge might never have appeared; but, as the saying is, 'A living dog is better than a dead lion.'

To which of these gentlemen belongs the discovery of an operation for the removal of cataract in infants? I leave it to their friends, respectively, to inquire and determine. All I desire is, that justice may be done on both sides, and Lord Nelson's motto, 'Palmam qui meruit, ferat.'—Now to my point.

Mr. Wardrop informs us, that '*some important practical improvements*' of Mr. Gibson's 'had been *brought forward* as the *discoveries* of others,' &c. He further informs us, that Mr. Gibson had the merit of banishing from the minds of surgeons the difficulties which had been conceived to attend the operation on infants, and of establishing, *by a long and extensive experience*, an easy and successful mode of performing it. The paper for which this merit is adjudged to Mr. Gibson by his biographer, was published *a few months before his death*, in the Edinburgh Journal, and 'was evidently intended,' says Mr. Wardrop, '*to lay open to the public an operation*, which he, Mr. Gibson, conceived was attempted to be kept secret, and claimed as the invention of another. At the same time he wished to describe an operation, which *he himself had been in the habit of performing for a considerable number of years*.'

Two inferences are plainly deducible from these statements: first, that up to the period of the publication alluded to, viz. a few months before Mr. Gibson's death, he knew that his improvements, though important and practical, were not known to the profession:—second, that he had established them by a long and extensive experience, and had been in the habit of performing his operation for a considerable number of years. His first motive to publication, according to Mr. Wardrop, was, that he conceived his secret was attempted to be claimed as the property of another. His second, and, as it would appear, subordinate motive, was, that he had been in possession of it a considerable number of years. Before, therefore, we go into the inquiry, whether Mr. Saunders pirated Mr. Gibson's improvements, and 'artfully announced them as secret remedies,' it will be but fair that we should know why Mr. Gibson had suf-

fered such improvements, practical and important as they were, to remain for so many years a secret in his possession, and why he was then only stimulated to publish them when he conceived that another had become as wise as himself. Mr. Wardrop will do well to extricate Mr. Gibson, himself, if he can, from this dilemma. Mr. Gibson, whom I well knew, was a man of too open and honourable a mind to conceal a professional discovery, or to suspect another of doing so, who was as incapable of a base design as himself. My respect for the memory of Mr. Gibson has impelled me to rescue his character from the imputation inseparable from Mr. Wardrop's account, though doubtless unintentionally allied to it. Biography is now as desperate a disease as poetry; and the friends of Mr. Gibson have reason to lament, that Mr. Wardrop has been deeply infected with it, as his eulogies discover. Every man who has risen in society above the ordinary standard, should appoint his anatomist or biographer in his will; for, it is far more likely that his enemies will drop a tear on his remains, than that they should escape being mangled by his friends.

V.

Singular Case of Abscess. By George Bottomley, Member of the Royal College of Surgeons.

James Todd, aged seven years, swallowed a piece of wild rye, *(Hordeum murinum,)* August 30th, 1812. September the 6th, he complained of severe pain about two inches from the navel, on the right side, which was attended with a considerable degree of fever. The pain continued violent till the 13th, when it moved to his back, about three inches below the scapula, and an inch and a half from the spine. His bowels were open, and his motions proper.

At first, there was neither swelling nor discolouration of the skin. On the 15th, the part began to enlarge. I applied a plaster with Empl. Galb. comp. On the 22d, the pain being more severe, the swelling increased, and considerably inflamed round the edge of the plaster, which I then removed; and upon examination found an evident fluctuation. Poultices were applied to the tumour.

On the evening of the 25th, a small dark point projected from the most prominent part of the tumour; to which, applying a pair of forceps, I drew forth a piece of wild rye, which the child had swallowed near four months before, and which

had not undergone the least alteration. After its removal, there followed, in a full stream, about a pint of pus.

The boy slept well that night; the next day he came down stairs; and in the course of a few days more was completely recovered; and has remained perfectly well ever since.

Croydon, Jan. 20, 1814.

VI.

To the Editors of the London Medical Repository.

GENTLEMEN,

THE most powerful stimulus to animate the research, and to invigorate the labours of the Professors of Medicine, and, consequently, to forward the progress of Medical Science, is, if we except the consciousness of benefiting our fellow men, the reputation and consideration awarded by their cotemporaries and by posterity to those, who, by investigating more narrowly and sedulously the pathology of those formidable diseases, which others, too indolent to examine, and too weak to discern, deem incomprehensible, and, consequently, incurable. This award is particularly due to those, who, either theoretically suggest, or practically demonstrate, a method and principle of cure, more successful than may have been before adopted.—You will, therefore, no doubt willingly, acknowledge, that every encroachment on the successful results of the laborious attention of scientific discoveries, ought to be pointed out; and the discovery referred to its original source.

In perusing a well written case of Hydrocephalus Internus, inserted in the first number of your work, I find that the author attributes the first suggestion of the influence of a diseased state of the chylopoetic viscera, in producing Hydrocephalus, to Dr. Cheyne. Without attempting to detract from the professional abilities of that learned physician, gratitude for the instructions, and veneration for the talents of one, whose unremitting zeal for the improvement of Medical Science entitles him to rank among the first physicians of the age, impel me to assert, that the learned Lecturer on Pathology at the Medical School of Guy's Hospital, first suspected, and first elucidated the remote cause of the disease in question. Dr. Currie, at the time when both Dr. Cheyne and myself were his pupils, publicly taught, "that although the affection of the brain is the proximate cause of death in Hydrocephalus, yet it is

only a consequence of inflammation brought on by a diminished or altered function of the liver."

Relying upon your candour and liberality, either to correct the statement complained of, or to give publicity to these observations, by inserting them in your Repository, and with best wishes for its success,

I am, Gentlemen, &c. &c.

Lyme Regis, Dorset, AGRESTIS.
Jan. 5, 1814.

*** The author of the Essay on Hydrocephalus, referred to in the foregoing letter, can assure *Agrestis*, that, whatever may be the merit of Dr. Currie, in having first suggested, "that the affection of the head in Hydrocephalus, is the consequence of a deranged state of the liver," he was totally ignorant of the Doctor's opinions on the subject, until made unacquainted with them by his letter. The following are probably the passages in the essay, which Agrestis regards as injurious to the fame of Doctor Currie. "Dr. Cheyne is the only author whose attention has been directly turned to the morbid state of the liver, and other chylopoetic viscera in Hydrocephalus; and whose examinations correspond with mine." (p. 25.) "Owing to the few dissections of Hydrocephalus, in which the abdomen was examined prior to Dr. Cheyne's time, it is less remarkable that the state of the chylopoetic viscera, and their influence in the production of this disease, should have been overlooked; and it is to this respectable physician, *as far as my information extends*, that we are indebted for the first hints on this subject." (p. 26.) The part of the last sentence printed in italics, shews the caution with which the observation was advanced.

With regard to Dr. Currie's opinion; if, as the quotation in the letter of Agrestis implies, it supposes, that every case of Hydrocephalus Internus is the consequence of some hepatic disorder, he goes much farther than either Doctor Cheyne, or the author of the essay in the Repository has ventured. Neither is it stated by Agrestis, whether Dr. Currie's opinion was founded on morbid dissections, or was merely hypothetical; circumstances, which constitute a very important difference in the history of discovery. No one, for example, would state that Sir Isaac Newton discovered the combustibility of the diamond; although he first hinted, that it, probably, was of an inflammable nature, from the degree of its refractive powers. But from whatever source the opinion in question was drawn, as Dr. Currie promulgated it in his Lectures only, at least the author of the essay knows of no work in which it has been

published, it cannot be expected that it should be known to an individual, who never attended his Lectures.

The opinions contained in the essay, were formed long before the author of it saw Dr. Cheyne's work. He was pleased to find them confirmed by so acute and accurate an observer; and he conceived that he was bound, in justice, to give him the merit of having first published these views of the pathology of this disease, which his own observations had led him to believe were the most correct. T.

VII.

A short Topographical Account of Richmond, in Yorkshire.

Richmond is situated in latitude 54° 26′ N. and in longitude 1° 42′ W. about 230 miles north of London, and between 30 and 40 from the east sea. It is a little within the verge of a mountainous country, with an extensive vale to the eastward. The river Swale half surrounds the town, which is built on unlevel ground, and the ascent in some of the streets is very steep. Some parts of it are close to the river, and others much elevated above it. Most of the streets are wide and well paved. The population, according to the census in 1811, was 3056, of which 1331 were males, and 1725 were females. There are no manufactories either in the town or the surrounding district. The inhabitants consist of people in independent circumstances, tradesmen, mechanics, and labourers. The soil to the north and north-east of the town is calcareous; to the west, it is sand; and to the east and south-east, gravel. The different strata rest upon lime-stone, and that upon beds of chertz, which in many parts project in the rugged banks of the river. As the town is at a considerable elevation above the vale, it is much colder, and on that account particularly obnoxious to phthisical patients, but, in other respects, very healthy. The ground about the town, and the mountains to the west of it, are sometimes covered with snow for weeks together, when the vale (at the short distance of five miles) is completely bare. Vegetation in the spring is mostly a fortnight, and sometimes three weeks, earlier in the vale than in the town.

*** This topographical notice is very satisfactory as far as it goes; but we beg to represent to our ingenious correspondent, and to our readers generally, that, in a *Medical Topography,* there are many other facts on which information is exceedingly desirable.

Those which occur to us at present are put in the following *Queries*, which we trust our correspondents will take the trouble, occasionally, to answer.

Query 1.—What is the distance and direction of the district, parish, or township, from the metropolis, and from the sea?

2.—What is its elevation above the sea, and the surrounding country?

3.—Is its surface uniform or irregular; its soil, clay, sand, rock, or bog; and the relative proportions? What is its relative proportion of pasture, arable, and wood-land?

4.—What is the source and direction of its rivers? state of its lakes and morasses? drainage?

5.—What is the quality of the waters? are there any mineral springs? at what period were they discovered? what are their chemical contents, and their known or presumed medicinal virtues?

6.—If there are mines, of what kind are they? what is their present and antient state? do the miners but occasionally go into, or do they entirely reside in them?

7.—What is the mean standard of the barometer, thermometer, and hygrometer? and the mean quantity of rain?—We have already been favoured with meteorological registers from two distant parts of the kingdom; but being desirous to make the investigation of this subject as comprehensive as possible, we should be glad to receive similar reports from other parts. Carlisle, Liverpool, Chester, Plymouth, some part of the New Forest Hampshire, or the Isle of Wight, Durham, South Wales, Newcastle, and the Coast of Kent, seem to be proper stations for making observations, which may afford data for general conclusions. As the principal object of our publication is to ascertain facts respecting health, and in this part especially to determine how it is affected by the atmosphere, we think these reports should be accompanied by a statement of the prevailing diseases, simultaneous with atmospherical variations.

8.—What wild animals, quadrupeds, birds, fishes, reptiles, and insects, are common or peculiar to the district or parish? Is the *coluber berus* (viper), the *anguis fragilis*, or any other known or reputed poisonous reptile, found? Are there ever found any poisonous sea or fresh water fish?

9.—What plants, poisonous, medicinal, or culinary, grow wild in the district, &c.?

10.---Are there any mineral substances, as arsenic, antimony, copper, iron, lead, mercury, sulphur, tin, &c. not mined in the district?

11.—What is the general state of health and disease? If there are prisons, poor-houses, and manufactories, are they sometimes, or often, subjected to diseases called contagious? What is the medical establishment and management of these places, and of the parochial poor generally?

12.—Is there any peculiarity in the district, presumed to influence the health of the population? what are the phenomena of that influence? Does asthma, phthisis pulmonalis, cynanche tra-

chealis, intermittent fever, hernia, or calculus, appear in an unusual degree?

13.—Have there been, or are there, any instances of extraordinary longevity; or is the duration of life evidently or demonstrably abridged?

14.—In what state is medical practice? Is it generally administered by those who are employed in all branches of the profession, or by physicians, surgeons, and apothecaries, each in his distinct branch? What is the number and designation of the regular practitioners?

15.—What is the extent and peculiarities of empiricism? If there are any noted empirics, on what is their fame founded? If they are famed for the cure of any particular disease, what is the method they employ; and if they have any secret remedy, if possible, to discover the composition of that remedy?

16.—Have the common people any peculiar mode of treating complaints, or have they any euporistic remedies of known or reputed efficacy?

17.—What is the state of the veterinary art, and what are the diseases of animals? Does rabies in the dog, or rot in the sheep, frequently occur? What are the supposed causes operating to the frequent production of these diseases in particular places?

18.—What hospitals, dispensaries, and receptacles for lunatics, public or private, exist? What are the rules by which they are governed, and the general beneficial results of these establishments?

19.—Are there any public or private medical libraries of considerable extent; and what scarce books or MSS. are deposited in them?

20.—If any medical practitioner is an author, what are the works he has published?

We doubt not that the ingenuity and research of many of our readers will extend these Queries much further. The infinite variety of nature, and the limited views which have, hitherto, been had of this subject, justify the remark, that much yet remains to be done. "In countries which have been the most completely examined, with respect to their natural history, the science is still so far remote from perfection, that in some departments new productions are every day discovered; while in others we find ourselves perpetually in need of correction as to nomenclature. Few nations have their botanical productions so fully elucidated as those of England and Sweden; yet such as look a little beyond the ken of vulgar eyes, find the Flora of both extremely imperfect." These observations, applied by Dr. Smith to the science of botany, may be extended to the whole of nature; and with respect to a correct and full medical topography of England, the justness of their application no one will controvert. We hope to excite a spirit of inquiry, which will lead to the removal of this defect.

EDITORS.

VIII.

An Account of an Epidemic which prevailed at Putney, about the close of the year 1813. By CHARLES SHILLITO, Member of the Royal College of Surgeons, and of the Society of Apothecaries, London.

THE following observations are transmitted to the Editors of the London Medical Repository, in consequence of their having invited a statement of such complaints as may be supposed to originate from some particular state of the atmosphere. The peculiarities of the situation to which they principally refer, the southern side of the Thames, are those usually conducive to health: a gradual ascent from the river to an elevated district, with a dry and sandy or gravelly soil, without manufactories; and, consequently, without the encreased ratio of poor attached to them. The employment of the lower classes, both males and females, is chiefly that of labour in the cultivation of garden grounds; circumstances which it will be easily conceived do not commonly tend to the prevalence of asthenic disease; and it happens very rarely, that complaints of a low type, except in some peculiar or individual instances, are met with. On the contrary, the inhabitants, who are of course liable to all the casualties, as well as to the natural decay of a frail existence, may be considered as usually having, in sickness, an inflammatory diathesis.

Towards the end of November, in the last year, a catarrhal fever began to prevail, and soon became very general. Cases of typhus, and cynanche maligna also occurred; and any chronic diseases, which had been latent in the human frame, seemed to be then called into action. In some instances paralysis proved suddenly fatal. And, in several families, from one or other of these causes, the wonted hospitality and festivities of the season were unexpectedly changed for mourning and distress.

The principal epidemic, for the most part, shewed itself by slight febrile exacerbations, languor, and restlessness; attended by much irritation and defluxion upon the pituitary membrane; but it was, in many instances, of a more severe nature. The fever was considerable, and of a typhoid character. The breathing very laborious, and sometimes sonorous, as in croup; so much so as often to have caused in the minds of parents considerable apprehension of that disease. Often, the febrile and catarrhal symptoms were attended with, or followed by wheezing, and other indications of asthma. Few cases occurred, where the feverishness was considerable, without a

frequent and very distressing cough, apparently caused in the first stage of the attack by a suppression of the natural secretion which lubricates the windpipe; and in the last stage by a formation of viscid lymph impeding respiration. The diminution of strength was often considerable; the thirst, in general, but slight; and the tongue usually shewed a moist fur in the centre, sometimes white, and at other times of a dusky tinge, with the edges preternaturally red.

In the milder cases, but little was required beyond a temporary confinement to a moderate warm air, and opening the bowels; which, particularly with children, were found inert, and the evacuations loaded with dark bile.

In the more severe cases, where the irritability of the trachea, with dyspnœa and cough, were very harassing, the inhaling of steam was of the most essential service. Draughts of hot water frequently afforded relief. Purging, blistering, and ipecacuanha, with the other common remedies under varying symptoms, were also occasionally used with success.

In several families, scarcely an individual escaped this epidemic. Although an exposure to the humid east wind was, without doubt, the more frequent exciting cause, yet it seems to have been sometimes communicated by infection. In one house, where I saw much of the disease, a monthly nurse was taken ill with feverishness and the common catarrhal symptoms, attended by an imperfect or diminished secretion of bile, to which she was subject. A short time afterwards, I was again sent for to the same family, in consequence of a lady of seventy-nine years of age; an infant of a few weeks, (both of whom had been constantly in a warm dry air,) and a maid servant of middle age, at the same time, labouring under the epidemic in its most severe form. The latter patient, whose case was the most violent, had been for a few days indisposed with what she considered to be a common cold; and, but a short time previous to my seeing her, had been attacked with a severe affection of the pulmonary organs. The dyspnœa was excessively distressing; the countenance was bloated, and of a darker hue than was natural, marked with the greatest anxiety; and the countless rapidity and irregularity of the circulation shewed the difficulty of a transmission of both blood and air through the lungs. This patient was of a very plethoric habit; and as she complained of a fixed pain in the side, and of transient dartings through the chest, I determined upon the immediate abstraction of some blood. When she had lost about eight ounces, she became quite faint, but no material relief followed until after the exhibition of an opiate, and the use of the inhaler; which produced expectoration, and the dyspnœa

and pain subsided.—She gradually recovered. The blood was not in the least sizy, and the crassamentum unusually dark, and of very slight texture. The elderly lady and the infant, who were also labouring under the same symptoms, both died after a few days from an inability to throw off the copious secretion from the trachea and bronchial glands, which generally followed the subsidence of the spasmodic affection, in the very severe cases. In no instance, in the meridian of life, have I observed the disease prove fatal; but it has left chronic complaints of uncertain event. To very tender infants, and to children of more advanced age, where the physical powers were feeble, it has been frequently destructive.

I have stated that simultaneous with this epidemic, which was in many cases attended with fever of a typhoid tendency, typhus and cynanche maligna also prevailed. During the greatest influence of this disease, the wind, which was for the most part very light, and accompanied by drizzling rain, was generally from the east or north-east. And so long-continued a current of inelastic air over the metropolis, deoxygenated, and loaded with putrid exhalations, seems to have predisposed to this very general, and in the district I have described, infrequent type of disease. Since the commencement of those remarkably dense fogs which occurred about the end of December, and with which the wind shifted to the west and north-west, and the thermometer sank under the freezing point, the epidemic has been on the decline. When pulmonic attacks have lately occurred, they have shewn an inflammatory character, and no new case of typhus or cynanche maligna has, since, come within my observation.

Putney, Jan. 24, 1814.

PART II.

FOREIGN MEDICAL SCIENCE AND LITERATURE.

PHYSIOLOGY AND PRACTICE OF MEDICINE.

I.—Dr. Majendie, Professor of Anatomy and Physiology in Paris, has presented a Memoir to the National Institute on the Use of the Epiglottis in deglutition. The epiglottis being

universally considered a mechanical arrangement, to prevent the escape of food into the trachea, during the action of swallowing, Dr. Majendie instituted a series of experiments on dogs to ascertain the truth of this general position.

He made an incision in the neck of a dog between the thyroid cartilage and the os hyoïdes; through this aperture, he drew out the epiglottis, and cut it entirely off. The external wound was united by sutures. One hour afterwards the dog ate with avidity and swallowed with ease; and on trying a liquid, with which it was supposed more difficulty would be experienced, he swallowed that also, without any distress; a few drops only escaped by the external wound.

Dr. Majendie then made a similar incision in the neck of another dog, and drew out the epiglottis so far, that he could distinguish the motions of the glottis, corresponding with those of the lungs. He perceived that it closed completely at the instant the larynx ascended; and on pouring a spoonful of water into the dog's mouth, he saw the glottis close again at the moment of deglutition, and found that this action was excited by passing his finger through the external wound into the pharynx. He also observed that the glottis was closed, with equal and complete exactness, whether during the presence of food, or the mere action of swallowing; and he then discovered that the mechanism which shuts up the glottis, is the contraction of the muscles of the larynx.

An experiment was then made on another dog, by making an incision in the neck, as in the preceding instances, and dividing the recurrent nerves. On exciting the action of deglutition, the glottis was found to close itself with less strength and exactness. The epiglottis was extirpated; and the dog left for a few days, without inspection, after which he was found to eat and drink with the greatest facility.

It had become evident by the last experiment, that the margins of the glottis were made to approximate by the influence of the superior laryngeal nerves. Dr. Majendie then tried what result he could produce by cutting these nerves; which was effected in a dog of considerable size, and the constriction of his glottis was found to be incomplete: the anterior part of its aperture was closed, but a distinct space (*un intervalle sensible*) was perceived at the posterior extremity; and the arytenoid cartilages no longer approximated each other in the same manner, as previously to the division of the laryngeal nerves. The epiglottis was taken off, and the external wound suffered to heal. The dog, at this time, was examined, and he was found to swallow, in general, with tolerable facility (*assez de facilité*); but it was evident, that some difficulty was experienced on particular occasions, which shewed itself by two or three efforts of coughing.

The remaining experiment was to divide both the recurrent and laryngeal nerves, which was performed on another dog. Every motion of the glottis became paralyzed; the animal attempted to perform the action of deglutition in vain, and the glottis remained open. The epiglottis was extirpated also in this dog, and he was left until the wounds of the neck were cicatrized. The creature could never afterwards swallow either solid or liquid food, without difficulty and coughing. The fact is thus expressed:—

"J'ai gardé assez long temps ce chien chez moi, où nombre de personnes qui l'ont vu, ont pu s'assurer qu'il avaloit avec la plus grande difficulté. En effet, chaque gorgée de liquide, par exemple, excitoit un accès de toux, et, il en etoit, à peu près, de même pour les alimens solides."

To complete his inquiry on this interesting subject, Dr. Majendie took another dog, and divided the four nerves which go to the larynx, and left the epiglottis untouched. This animal is still alive and swallows with extreme difficulty, each attempt at deglutition being followed by a considerable attack of coughing.

In the true spirit of philosophical research, and with a view to minute correctness, Dr. Majendie dissected the distribution of the recurrent and laryngeal nerves, which, he says, have been loosely described in the best anatomical works, as distributed in common to the muscles of the larynx. We must, however, make an exception to this observation in favour of a British author; for it will be found in Bell's Anatomy, edition of 1811, vol. ii. page 473, 4, 5, that the particular distribution of these nerves is described, and corresponds almost exactly with Dr. Majendie's investigation; the result of which is to prove, that the branches of the recurrent nerve go, exclusively, to the posterior and lateral crico-arytenoid, and to the thyro-arytenoid muscles. No branch of it has been observed either in the crico-thyroid, or arytenoid muscles; whilst the laryngeal nerve sends a large branch to the arytenoid muscle, and another to the crico-thyroid, which is not so remarkable by its magnitude as by its course. It is found to descend between the thyroid cartilage and the thyro-arytenoid muscles; then it is seen between this cartilage and the lateral crico-arytenoid muscle; and is, ultimately, lost in the crico-thyroideus. It sometimes happens, however, that, instead of following this usual course, it passes in a sulcus of the cartilage, and thus arrives at the same destination. This arrangement Dr. M. observed very frequently in the dog, but seldom in the human subject. On several occasions this branch could not be found, even when searched for with the utmost care, in which cases the external branch of the laryngeal nerve, which is principally

distributed in the substance of the crico-thyroideus muscle, was much larger than usual.

The remaining twigs of the laryngeal nerve do not go to the muscles of the larynx, but are chiefly destined for those of the epiglottis and the mucous membrane, lining the entrance of the glottis. A considerable number pass near the upper margin of the thyro-arytenoideus muscle; but not one has been found to penetrate into its substance. From these facts Dr. Majendie has drawn the following conclusions:—

1. That the epiglottis is not indispensable to deglutition.

2. That during deglutition, at the moment of the ascent of the larynx, the margins of the glottis and arytenoid cartilages approximate, and the entrance of the larynx is so completely closed as to prevent any escape into it of whatever is passing into the œsophagus.

3. That the recurrent nerve, when it has reached the larynx, gives off branches only to the posterior and the lateral crico-arytenoid, and to the thyro-arytenoid muscles, whilst the laryngeal nerve sends twigs to no other muscles (of this part) than the arytenoid and crico-thyroid. Another consequence of the attentive dissection of parts about the larynx has been to confirm Dr. Majendie in the belief, that the crico-thyroid muscle serves to raise its cartilage at the instant of deglutition, by which the superior edge of this cartilage is carried under the inferior edge of the thyroid cartilage.

II.—Dr. Galés, of Paris, has lately published an Essay on the Diagnostic Signs of the Itch, its Causes, and Treatment. He enters very fully into the history of the complaint, and seems to have given more experimental attention to the subject than any of his predecessors.

The ancients believed the itch to be caused by a depravation of the fluids of the body: Galen speaks of a melancholic humour, Avicenna, of one hot and acrid. The chemical physicians, seeing every thing through the medium of their own principles, took another view of the disease. Sylvius said it was a corrosive acid; Van Helmont, a particular ferment in the blood; others, an acrimony of the serum; and, although the occasional existence of animalcula in the skin was known many centuries ago, their presence in the itch appears to have been first noticed by Redi and Cestoni, Italian physicians, towards the end of the seventeenth century; by whom they were said to resemble mites in cheese. The insect, *Acarus Scabiei*, is also mentioned in the *Acta eruditorum* for 1682, with an engraving. Dr. Mead's account of it and the plate, inserted in the Philosophical Transactions for 1703, were taken from the description of Cestoni, who wrote on the subject in 1687. Subsequent naturalists have confirmed these statements.

Dr. Galés having resided in the Hospital of St. Louis, where patients daily come in with the disease, commenced a course of experiments with a good microscope, and, at various times, inspected above three hundred of these insects, which exactly correspond with the description of them given by Linnæus. He put several living insects into a watch glass, and reversed it on the back of his hand, between the metacarpal bone of the thumb and fore finger, securing it by a bandage, having previously rubbed the skin gently. In this state he slept; but, three hours afterwards, was awaked by a slight agreeable titillation (*chatouillement*), which in the morning had become a troublesome itching. On removing the glass, at this time, he found three miliary pustules within the area occupied by the glass; they had the true character of itch. He bathed the part with linimentum ammoniæ, which converted the former sensation into a smarting, and removed the malady. Messrs. Bosc, Olivier, Dumeril, Latreille, and Richerand, recognized the disease. Dr. G. tried the same experiment with mites from cheese; but they neither made a lodgment under the cuticle, nor altered the appearance of the skin.

Dr. Galés considers that the itch can be communicated only by contact; a warm atmosphere and a moist skin being the causes which predispose persons to receive it. The disease is very prevalent in certain parts of France; for instance, in the neighbourhood of Limoges, Auvergne, and Lower Brittany, where the inhabitants live in small cottages, herding with the cattle, (*y vivent pêle mêle avec les animaux*,) and are, by habit, extremely filthy. Two battalions of infantry, which passed through Brittany in January and February last, had 1196 individuals affected with the itch, whilst those who traversed Poictou and the neighbouring districts were almost totally exempt from it.

A general review of the treatment of the itch, and of experiments made with certain compositions and nostrums without sulphur, occupies several pages. They were all found to be partially, or totally, inefficacious; and sulphur is recommended as the safest and most expeditious remedy. The successful operation of sulphur is considered to arise from its volatilizing by the heat of the body; and from the gas so produced being destructive to the animalcula of itch in common with other insects. Dr. G. proved this fact by melting sulphur near a glass in which he had placed some of the living animalcula, which were instantly killed. The disease, therefore, can be cured without the actual contact of an ointment of sulphur with every part of the skin, and we find, that Professor Chaussier directs a small quantity (*une pincée*), of a powder to be well rubbed on the palms of the hands. The composition is made with equal parts of Flor.

Sulph. and of Litharge well levigated, and half the quantity of Sulphate of Zinc. We are not informed how frequently this ought to be applied; but we consider that twice or three times a day, during ten minutes before a fire, would be sufficient*.

It has been a common prejudice amongst French physicians to fear dreadful consequences, and the production of other diseases, from suppressed itch (*gale repercutée*). We often see this apprehension in the writings of those who ought to have been better informed; but we have much satisfaction in finding that Dr. Galé's takes a more philosophical view of this question, and declares, that it is only to be considered subject to the same precaution as the suppression of any other habitual excretion, and the removal of extensive cutaneous inflammation. "Accidens non particuliers à la suppression trop brusque de la gale, mais communs à celle de toute phlegmasie cutanée; sur tout, quand elle est habituelle, et même d'un simple excretoire: aussi ne surviennent-ils que dans les cas de gale, où la grande multiplication de l'insecte irrite considerablement la peau et y produit un grand afflux de serosités."

Towards the end of the Essay, we are made acquainted with a mode of treatment which the Doctor prefers to every other, particularly in very bad cases of itch. It is a fumigation produced by throwing half an ounce of sulphur, mixed with two drachms of nitre, into a warming pan of hot coals, which is to be employed in the usual manner of warming the bed. The patient is then to strip naked and get under the clothes, which are to be closely tucked round his neck and shoulders so as to prevent, as far as possible, the escape of the gas. Two of the worst cases of itch were thus cured without any inconvenience to the patients, who slept soundly. The process was continued seven successive nights. Fifteen other cases were afterwards submitted to this management, under the inspection of Dr. Alibert, who witnessed its efficacy.

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* A quack remedy, called "The Smelling Medicine," has been long used for the cure of itch in this country. It is made of finely-powdered Sulphur Vivum, mixed with a little lard, (just enough to give it tenacity,) and a few drops of oil of lavender. This is directed to be well rubbed on the hands at night, smelling it frequently. Perhaps this, or Professor Chaussier's powder, will frequently succeed in such slight cases of scabies as are met with in private practice, when it is not convenient to remain shut up two or three days, smeared with sulphur ointment. On these occasions, a tea-spoonful of Flor. Sulph. may be taken night and morning, in a tea-cupful of milk.

III.—Another method of treating itch has been proposed by M. Iadelot, who communicated his ideas on the subject to the Medical Society of Paris, in a paper, read to it on the 6th April, 1813. M. Iadelot adopts Dr. Galés' opinion, that the disease is local, and produced by the *acarus scabiei;* to destroy which, he employs a bath prepared by adding to the usual quantity of water, heated to 98° Farenheit, four or five ounces of sulphuret of potass. This bath is to be used once every day, the patient stopping an hour in it each time. No internal remedy is required to be given, nor any particular regimen observed. From five to ten baths only are necessary for the cure of a recent pustular or miliary itch; but in inveterate cases, twenty may be requisite. Five considerable advantages are regarded by M. Iadelot as attached to his plan:—1. The disease is more expeditiously cured. 2. The cure is more certain. 3. It is less offensive, because the linen is not soiled with ointment. 4. No sulphurous exhalation takes place from the patient; but the skin is rendered whiter, and several cutaneous affections, which often accompany itch, are cured at the same time. 5. The general habit is less impaired, the appetite remains, and children are less liable to catarrhal affections than by the ordinary method of treatment.

CHEMISTRY.

IV.—The *Journal de Physique*, for May 1813, contains an interesting paper by Vogel, entitled "De l'Action de la lumiere solaire sur le Phosphore." It details the results of experiments, in which pieces of pure phosphorus, immersed in water and other transparent fluids, or placed in vacuums, and in different gases, were exposed to the direct rays of the sun; to the prismatic spectrum, and under different coloured glasses. It relates also some well-conceived experiments, undertaken with the view of ascertaining, whether phosphorus contains any carbon; Berthollet, Heller, Pelletier, Brugnatelli, and some other chemists, having suggested the idea that carbon is a constituent part of this substance. The following are the conclusions to which the experiments led.

1. White and transparent phosphorus, exposed to the sun in water deprived of air, and in some other transparent liquids, becomes red without the formation of phosphorus acid. The blue flame of burning sulphur, and the white flame of the white fire of the Indians *(feu blanc des Indiens)*, does not produce a similar effect upon it.

2. It does not become red in the sulphur liquid of Lampadius, which may be attributed to the presence of sulphur. A phosphuret of sulphur exposed to the sun, becomes red only at

the instant when the greatest part of the sulphur is disengaged with the hydrogen of the water.

3. Phosphorus becomes black in liquid ammonia; and this change of colour is much more rapid when the fluid is exposed to the sun.

4. It becomes red, when exposed to the sun, in the vacuums of Boyle and of Torricelli. In the latter it is deposited on the sides of the tube in the form of brilliant spangles.

5. It becomes red very rapidly in hydrogen and azotic gases, and the sides of the flask are covered with red star-like crystals. In the same degree of temperature, phosphorus melts in azotic gas; but preserves its concrete form in hydrogen gas. Phosphorus becomes red also in carbonated hydrogen gas, carbonic acid gas, and in arseniated and sulphuretted hydrogen gases.

6. Phosphuretted hydrogen gas becomes red in the sun; but the red precipitate, which it deposits, contains no carbon.

7. Ammoniacal gas, passed through melted phosphorus, communicates to it a dark colour, and disengages a little phosphuretted hydrogen gas. When phosphorus is exposed to the sun's rays, in a receiver filled with ammoniacal gas, it becomes black, combines with the ammonia, and is capable of absorbing the gas.

8. Phosphorus is reddened much more quickly by the violet rays of the prismatic spectrum, than by the red rays; more rapidly under violet glasses, than under red glasses.

9. White transparent phosphorus, distilled many times, displays no trace of carbon. The red powder which it forms in the different gases exposed to the sun, or which remains after its rapid combustion, is not a phosphuret of carbon, as Thenard announced, but is a red oxide of phosphorus.

10. By exposing phosphorus to a slow combustion, no carbonic acid is formed.

V.—On the 6th of December 1813, Gay-Lussac read a memoir to the French Institution, on a new chemical substance, which, about two years ago, was accidentally discovered by M. Courtois, a manufacturer of saltpetre at Paris. The following is briefly the History of the discovery. M. Courtois, finding that the metallic vessels, which he employed for extracting soda from kelp, were very quickly corroded, employed himself in investigating the cause; and, during his operations for this purpose, obtained the new substance. Specimens of it were given, by the discoverer, to M. M. Desormes and Clement, who read a paper, containing an account of some experiments to which they had subjected it, to the Institution, on the 29th of November 1813. The substance of Gay-Lussac's Memoir was published in the Moniteur of the 12th of December last, from which the following account is abstracted,

"This substance, which has been denominated *Iode* or *Iodine*, from ιωδης, *violaceous*, is said to possess, in a high degree, the electrical properties of oxygen and oxymuriatic acid. When it is purified by means of potass and distillation, it is infusible at 212°, and has nearly the volatility of boiling water. No re-agent discovers in it any trace of muriatic acid.

"*Iodine* combines with almost all the metals; but, as it is a solid, less caloric is disengaged in these combinations than by oxymuriatic acid, although in its general properties it greatly resembles that substance. To give an idea of its relations with other bodies, Gay-Lussac compares it with that acid, and gives two hypotheses which have been formed regarding its nature; adding, that, by combining with hydrogen, a peculiar very strong acid is formed, which is capable of assuming the gaseous form, is very soluble in water, and bears the same relation to *iodine* that muriatic acid has to oxymuriatic acid or chlorine*. The action of phosphorus on *iodine* furnishes the means of obtaining the new acid, both in a gaseous and a liquid form.

"If dry *iodine* and phosphorus be agitated together, a reddish-brown matter is obtained, which disengages no gas: but, if this matter be moistened, it immediately emits acid fumes, and at the same time phosphorus acid is formed. The new acid is easily obtained in a gaseous state, by using iodine a little moistened; the quantity of water being, then, sufficient only to occasion its formation, but not to condense it. If iodine and phosphorus be combined under water, a small portion only of sulphuretted hydrogen gas is disengaged: if the iodine be in greater quantity than the phosphorus, the liquid is deeply tinctured reddish-brown; but it is colourless if the phosphorus predominates. In general a red coloured mass remains, insoluble in water, and which contains both iodine and phosphorus; but the proportions may be so regulated, that the whole of the compound will dissolve in water, and the solution remain as limpid as water. If this acid liquor be distilled, water first comes over, and the new acid does not pass into the receiver until the fluid in the retort becomes highly concentrated: ultimately nothing remains in the retort but phosphorous acid,

* As the different opinions regarding oxymuriatic acid or chlorine are probably not known to all our readers, we think it necessary to state, that Sir H. Davy, and one set of chemists, support the opinion suggested by Scheele in 1774, that it is an undecompounded body, an element of muriatic acid, and as its colour is greenish, have named it *chlorine*, from χλωρος, *green*; whilst Mr. Murray, and another set, still maintain the opinion of Lavoisier and Berthollet, that it is a compound of muriatic acid and oxygen, and thence is properly named *oxymuriatic acid*.—EDITORS.

which soon disengages an abundance of phosphuretted hydrogen gas. It thus appears, that the union of dry phosphorus and iodine produces a combination analogous to that of oxymuriatic acid and phosphorus: and when they are moistened, a similar effect takes place as when the liquid of phosphorus is thrown into water: the oxygen of the water uniting with the phosphorus forms phosphoric acid, while its hydrogen combining with the iodine forms the new acid.

"The following are the characters of this acid. In the gaseous state it is colourless; has the odour nearly of muriatic acid gas; smokes when in contact with air; is rapidly absorbed by water; gives, with oxymuriatic gas, a beautiful purple vapour; and speedily alters when allowed to remain over mercury. It forms with this metal a greenish yellow substance, similar to that which is obtained by the direct combination of mercury, and the vapour of iodine, while hydrogen gas is evolved equal in volume to half the volume of the acid gas. Agitation, for a few minutes, is sufficient for the entire decomposition. Iron and zinc produce a similar effect.

"This acid in the liquid state, obtained by a solution of the gas in water, forms a liquid which is dense and not very volatile. It rapidly decomposes the alkaline carbonates, and dissolves iron and zinc with the disengagement of hydrogen gas; but does not attack mercury, even when aided by heat, a proof of its strong affinity for water. With Barytes it forms a soluble salt, and gives with corrosive sublimate a red precipitate, soluble in an excess of the acid. When a few drops of oxymuriatic acid are poured on it, the new substance is immediately regenerated. When it is heated with black oxide of manganese, or with the red or brown oxides of lead, *iodine* is disengaged, and the oxides are brought into that state in which they are generally soluble in acids. The red oxide of mercury regenerates iodine: and we may conclude that all the oxides which change muriatic acid into oxymuriatic acid, will convert the new acid into *iodine*. When the solution of this acid is subjected to the action of the galvanic pile, *iodine* appears at the positive pole. When sulphuric acid is brought into contact with the combination of the new acid and potass, sulphurous acid is formed, and *iodine* disengaged: in the same manner nitric acid forms nitrous acid. If phosphoric or boracic acids, either dry or dissolved in water, be employed, no decomposition takes place.

"What occurs when *iodine* is placed in contact with other bodies, may now be easily conceived.

"With hydrogen, at a high or a low temperature, the new acid is obtained; but it is usually impure, because it is capable of dissolving a great quantity of *iodine*, which defends it from the contact of the hydrogen.

"Sulphuretted hydrogen rapidly deprives *iodine* of its colour, and converts it to the state of acid, while sulphur is deposited: and it produces the same effect as the combination of *iodine* with the alkalies, furnishing brown and colourless solutions. It is to be observed, that when *iodine* is dissolved in ether, or alcohol, and precipitated by sulphuretted hydrogen, no sulphur is deposited.

"Sulphurous acid quickly converts *iodine* into an acid, passing itself to the state of sulphuric acid. Phosphorus acid and the sulphuretted sulphites also produce the same acid. Hence we may conclude that in kelp, which contains abundance of sulphuretted sulphites, the new substance is in the state of acid: it does not appear in the mother ley of that substance till these salts are destroyed.

"*Iodine* is not altered by charcoal and the sulphurous acid*, because these substances cannot furnish the hydrogen requisite to convert it into an acid. It does not decompose water at any temperature. It deprives Indigo of its colour. The mineral acid, and even acetic acid, separates it from its combinations. It combines with most of the metals without evolving any gas. When some of these combinations are made under water, (for example, that with *iodine* and zinc,) nothing is disengaged; but, the fluid, at first strongly coloured, becomes soon as limpid as water: the alkalies precipitate from it a substance which has all the characters of oxide of zinc, but which retains some of the new acid. In this case the water has been decomposed, and oxide of zinc and the new acid produced. This compound, like all that contain the new acid, gives out sulphurous acid when treated with sulphuric acid. Eighteen grains of *iodine* dissolve about three grains and a half of zinc: hence it may be concluded, that the ratio in weight of oxygen to iodine is as 1 to 20, or 15 to 100. With oxymuriatic acid it forms an orange, yellow substance, crystalline, volatile, deliquescent, and appearing to exist in two different proportions.

"*Iodine* forms, as is said, a fulminating powder with ammonia; the theory of which is simple, if we suppose that *iodine* has a powerful tendency to combine with hydrogen.

"From the preceding description, we cannot avoid comparing iodine with chlorine, and the new acid with muriatic acid. It is remarkable that hydrogen is always necessary to convert *iodine* into an acid. This substance appears to act, in nature,

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* The word sulphurous appears to be introduced here by mistake, as in the foregoing passage it is stated that sulphurous acid converts iodine into an acid. The last part of the sentence is hypothetical. EDITORS.

the same part, with respect to a certain class of bodies, as oxygen performs to another. All the above mentioned phenomena may be explained by supposing that *iodine* is an element, and that it forms an acid by being combined with hydrogen: or by supposing that this last acid is a compound of water, and an unknown base, and that *iodine* is this base united with oxygen. The former hypothesis appears more probable than the latter, and it serves at the same time to give more probability to that which regards oxymuriatic as a simple body. If we adopt it, the most suitable appellation for the new acid is *hydriodic* acid."

We are, by no means, prepared to adopt the hypothesis of Gay-Lussac. On the contrary, we rather feel our faith in the opinion, that chlorine is a simple body, shaken by several of the facts detailed in the above paper: but as we are at present engaged with a course of experiments on *iodine* and its combinations, we shall defer our sentiments on this subject till some future period.

PHARMACY.

VI.—The following is the translation of the paper of M. Figuier, which we promised in our last number. It is entitled *Observations on the Preparation of the Acetate of Potass*; by M. Figuier, Professor of Chemistry, in the school of Pharmacy at Montpellier*.

"Among the medicines belonging to the class of salts, the foliated earth of tartar is one of the oldest, and the most generally prescribed. The employment of it by physicians of almost every country is an undeniable proof of its efficacy.

"The process by which this salt has been usually prepared, is far from being a perfect one, as it is always more or less coloured, although colourless substances are used for its composition. The persuasion that its properties would be improved if it could be obtained perfectly white, has engaged many celebrated pharmocologists to investigate the cause of its colour. The learned and laborious Beaumè attributed it to the presence of an empyreumatic oil which passes over towards the conclusion of the distillation of the vinegar; and, therefore, advises that the first portions only of the distilled vinegar be employed, which, as they contain none of this oil, furnish a white acetate.

"This method presents both advantages and disadvantages. The acetate is undoubtedly less coloured; but the first portions of the distillation of vinegar, being very watery, a large quantity is required to saturate a small portion of potass; and the

* *Annales de Chimie*, vol. lxxxvi. p. 44.

last products, which are much more acid, being unfit to be employed, this method cannot be recommended in an œconomical point of view; and is therefore seldom put in practice.

"Some pharmaceutists whiten the acetate of potass by melting it in a silver or china vessel. The heat destroys the colouring matter; but at the same time, it volatilizes one part of the acid, and decomposes another; hence the acetate becomes super-alkaline. If this excess of alkali be resaturated with distilled vinegar, the quantity required is sufficiently great to renew the colour of the acetate, which, although in a smaller degree certainly than before it was melted, yet is sufficient to demonstrate that the desired effect has not been produced.

"In commerce, a white acetate is sold, which is procured by decomposing the acetate of lead by the subcarbonate of potass. But great inconveniences may evidently result from the use of an acetate thus prepared.

"The Pharmaceutical Society of Paris, contemplating the great advantages which would be obtained to the healing art by having a pure acetate of potass, proposed, in 1808, the following as a prize question. "How should the acetate of potass be prepared, so as to obtain it white, and perfectly neutral, without having recourse to fusion; and whether is the colouring principle derived from the acid or the alkali?" The two successful authors, M. Fremy and Bernoully, resolved the question in a very satisfactory manner. They ascertained that the colour of the salt depends on the presence of a vegeto-animal matter* of the nature of ferment, and an empyreumatic oil, which rise with the vinegar during its distillation, particularly towards the end of the process. They directed, as Beaumè had done, that the first portions only of the distilled vinegar, as they contain less of these foreign bodies, should be used; and they still farther freed the acetate from them by filtering the liquor, previously evaporated to three-fourths of the original quantity, through powdered charcoal; and by a subsequent evaporation with a gentle heat, they procured a whiter acetate than had yet been obtained.

"Reflecting that the property of abstracting colour is more decided in animal than vegetable charcoal, I conceived that by employing it, a perfectly white acetate might be prepared; and with this intention the following experiments were instituted.

"High coloured vinegar (*vinaigre rouge*) was distilled in a

* It is more probably extractive mucilaginous matter, which was found in distilled vinegar by the Count de Chanteloup, and described by M. Darracq.

tin alembic, with a worm of the same material. The first portions that passed over were set apart, and the distillation pushed until very little liquid remained in the cucurbit. Two kilogrames of pure subcarbonate of potass were then saturated, by the assistance of heat, with the last portions of the distilled vinegar, or those which contained the greatest quantity of the extractive and the empyreumatic oil; consequently the least adapted for furnishing a white acetate; and the saturated liquor was poured into an earthen pan. When cold, it was decanted, and the evaporation conducted in a silver vessel, care being taken to add, now and then, a little acid; and when the liquor was reduced to one-fourth of its original bulk, it was divided into two parts. In this state it was very high coloured. Into one part were mixed sixty grains of charcoal of bones, which had been previously treated with muriatic acid, in the manner I have pointed out*, to free it from the phosphate and carbonate of lime it contained. The other part was evaporated to dryness, and yielded a brown coloured acetate; which was re-dissolved in pure water and mixed, as in the former instance, with sixty grains of the same charcoal. Some hours afterwards, both liquors were filtered through bibulous paper (*papier Joseph*), and both were colourless. They were now evaporated separately, by a moderate heat, and, when the matter became consistent, were stirred with a glass rod, until they were completely desiccated. Both liquors yielded an acetate comparatively whiter than I had obtained in following the processes of the authors of the two successful memoirs above mentioned; the whiteness equaling that of the subcarbonate of potass which had been used for its preparation.

"This power of abstracting colour possessed by animal charcoal, therefore, affords every thing we can desire for obtaining acetate of potass, both as to what regards the goodness of the product, and the œconomy of the process. I have employed it also with success, in freeing from colour the mother water of the salt of segnette, and those of phosphate of soda; and, in many chemical manufactories, it is now used, on a great scale, for obtaining certain salts, perfectly white, by a first crystallization; which, before the discovery of its properties, required many repeated solutions and crystallizations.

"The residue of the distillation of the animal matters, employed for the manufacture of sal ammoniac, furnishes a very large quantity of animal charcoal. The proprietors of these establishments will, henceforth, find a market for this article;

* *Annales de Chimie*, Vol. lxxix.

which was considered of scarcely any value, before its properties for the above-mentioned purposes were known."

Before making experiments to ascertain the correctness of Figuier's process, the following examination of the acetate of potass, as found in the shops, was undertaken with the view of determining the uniformity in the ordinary process for manufacturing it in this country.

Three parcels of the salt were procured. The first, which we will denominate No. 1, from Apothecaries Hall, was not perfectly white, but rather of the colour of unbleached ivory, not crystallized, but in small granular masses: the second, No. 2, obtained from a very respectable wholesale Chemist and Druggist, was equally white, but less clear in its aspect; and was crystallized in shining foliated, or micaceous plates: the third, No. 3, procured from another equally respectable dealer, was crystallized in the same manner as No. 2, and of a leaden or dead white hue: and a fourth, which we will term No. 4, and which we obtained by decomposing the superacetate of lead by the pure carbonate of potass, was whiter than any of the other specimens, but resembled No. 1. in its general aspect.

Four drachms of each of these specimens were exposed to the air, under similar circumstances, for the space of four days; at the termination of which, No. 1. was found to have attracted sixty-three grains of water; No. 2, seventy-two grains; No. 3, seventy-eight grains; and No. 4, one hundred and twenty-two grains. To each were then added twelve fluid ounces of distilled water; and the solutions, after having stood twenty-four hours, were filtered. All the specimens, when tested with turmeric paper, displayed a superabundant alkali; but more particularly that one procured from Apothecaries Hall. When tested with sulphuretted hydrogen gas, scarcely any effect was produced on Nos. 1 and 2; but a small portion of a blackish precipitate was thrown in No. 3, and a much larger proportion in No. 4, indicating in both the presence of an oxide of lead.

From the above experiments, it would appear that the acetate of potass, procured in London, is prepared by different processes by different manufacturers; and that some even do not hesitate to employ an acetate or superacetate of lead. This certainly ought not to be the case; and it becomes, therefore, a matter of importance to determine by what process every medicine is to be procured of the best quality of its kind, at the cheapest rate, and always uniform in its properties. In the case of the medicine under consideration, the process of M. Figuier appears well adapted for yielding a pure and neutral acetate.

BOTANY.

VII.—We have little to offer to our readers on this subject. In the *Memoires de l'Institut de France*, for 1809, mention is made of a work on the germination of grasses, by M. Poiteau.

With respect to that part of the seeds of this natural class of plants which should be considered as the cotyledons, a very remarkable diversity of opinion has existed. Gaertner regards the scale or shield as vitellus*, while Richards believes it to be the body of the radicle: but M. Poiteau, observing that this organ is placed at the point of separation of the plume and radicle, considers it as a true cotyledon. His researches on this subject have led M. Poiteau, accidentally, to observe an effect in the progress of the vegetation of the seeds of grasses which had hitherto escaped observation. He noticed that the instant when the radicle of grasses shews itself, it assumes the figure of a cone, and represents the main root, or caudex, of other plants; but, as soon as the lateral roots have attained a certain degree of growth, the cone is obliterated and destroyed, so that no full grown plant of this class has a caudex. M. Poiteau has remarked, that the same circumstance exists in many other plants with a single cotyledon, (monocotyledons,) which would lead to the supposition, that this substitution of many, and secondary roots for a main one, depends on each bundle of fibres in the stems of monocotyledons requiring a distinct root.

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* As Gaertner's work is scarce, we shall transcribe his definition of the vitellus, and some of his observations on it as found in the seeds of grasses. "Vitellus est interaneorum seminis pars varia atque multiformis, quæ inter embryonem atque albumen medio plerumque loco posita, et a cotyledonibus perinde ac ab albumine diversa est." (*De Fructibus*, *Introd.* p. cxlvi.)—"In his (graminibus) vitellus figuram habet squamæ scutiformis, cui antice embryo, postice autem grande albuminis corpus adhæret.—In omnibus veri nominis graminibus carnosum quoddam et compressum reperitur corpusculum, quod ex altera exteriore sua parte planiusculum aut sulco longitudinali excavatum est, in quo embryo jacet, ex altera vero æquabilem habet superficiem, qua ipsa albumini externe junctum, eidemque quasi agglutinatum est. Singularem hanc vitelli speciem, proprio *scutelli cotyledonei* nomine distinguimus, eamque pro essentiali et characteristica graminum nota tanto confidentius habemus, quod scutellum in his absque exceptione omnibus, nec in ullo alio cognito semine hactenus repertum sit.—Situs semper in inferiore aut laterali albuminis parte, ut detractis integumentis, statim embryo cum suo scutello, extra albumen posito, in conspectum veniant." *Ibid*, p. cxlix.

Editors.

PART III.

ANALYTICAL REVIEW.

I.

Engravings from Specimens of Morbid Parts, preserved in the Author's Collection, now in Windmill Street, and selected from the Divisions inscribed Urethra, Vesica, Ren morbosa et læsa, containing Specimens of every Disease which is attended with Change of Structure in these Parts, and exhibiting the Injuries from the Bougie, Catheter, Caustic, Trochar, and Lithotomy Knife, incautiously used; with Observations. By CHARLES BELL, F. R. S. E. &c. &c. &c. Folio. Fasciculus I. pp. 45. Plates xii. Longman and Co. London, 1813.

EVERY work derives its interest with the public, either from the importance of its subject, or from the talent displayed in its execution. When the subject is in itself of high value, and the author, capable of comprehending it in its fullest extent, has by industry made himself acquainted with its points and bearings, and is, by habit, sufficiently accustomed to composition, the expectation of excellence arising from such a combination, will, probably, be realized. The quality of the ingenious volume before us, supplies, in no small degree, these desiderata.

This Fasciculus of a series of engravings, the only one yet published, from specimens of morbid parts, in the Windmill-street Museum, contains, the Anatomy of the Urethra, and the principles of Pathology as regards it; plans explanatory of the introduction of the catheter—engravings and descriptions of the different kinds of strictures—casts of diseased urethra—false passages made by the bougie—consequences of caustic applied to the urethra—with fistula in perinœo.

The importance of the work, as regards its subject, this enumeration fully shews. The means of elucidation afforded to the author by his valuable Museum, and his frequent opportunities for dissection, which, within the last five years, have enabled him "to add to his collection thirty specimens of diseases of the bladder and urethra," give the public claims upon him, that will require an employment of all his industry, an exertion of all his talents to discharge.

The pages of this Fasciculus, from 3 to 15, are occupied by

a descriptive account of the ligaments and muscles which are connected with the course of the urethra and neck of the bladder, and of the structure of the urethra. As a specimen of the author's manner, we quote the following particulars respecting the membrane of the urethra; and also because we think they will be acceptable to our readers.

"The *membrane of the urethra* is the continuation of the inner coat of the bladder. It is compressible and elastic, very thin, and nearly transparent. It has the character of the mucous membranes, which are contiguous with the surface, and discharge copiously. It is the sensitive organ, if I may so express myself, to the surrounding muscles. The muscles of the intestines are not easily moved, unless the excitement be applied to the inner coat, and in the urinary organs the same law holds, viz. that the excitement of the mucous membrane of the canal is the natural call to action of the surrounding muscles. Besides these direct sympathies, the urethra and bladder have a most remarkable consent with the skin and intestinal canal: they are besides very intimately connected with that controlling influence of the animal machine which we call the constitution."

"*Muscularity of the Urethra.*—While the membrane of the urethra exhibits symptoms of being influenced in the same way with the skin when under the effects of change of temperature, or of passion, or of sickness, there is yet no proof that this membrane is muscular. It must be observed, that those who have described the muscular fibres of the urethra have differed essentially, inasmuch as some have described the fibres as running in the length of the canal *(Camper)*, and others have represented them as encircling it *(Le Cat)*. By no experiments have I been able to draw the membrane of the urethra into contraction, nor have I observed a spasmodic action in the canal, which was not referable to the muscles surrounding it."

"*Vascularity of the Urethra.*—Under the fine membrane of the urethra, there run many veins, which take a course for the most part parallel to each other, and longitudinally with regard to the canal. These veins are branches of the venous structure of the penis, but possess a character very distinct. They can be filled with quicksilver, so that their regularity is very little broken by the connections with the deeper veins. Towards the neck of the bladder, within the bladder, and near its orifice, these veins make a very splendid exhibition, when injected with quicksilver. When the quicksilver is pushed forcibly into these vessels, it passes into the veins about the prostate. There is something more than this remarkable in the membrane of the urethra; for when the quicksilver is forced into these veins, it extravasates and bursts up the membrane, and the quicksilver still preserves the appearance of being in vessels, which is owing to the cellular connection of the membrane of the urethra with the parts below. The membrane thus raised by the quicksilver is remarkably thin; so that the quicksilver appears

as if it lay on the surface instead of being under the membrane."

"*Inflammation of the Urethra.*—Nothing is more remarkable than the softness and whiteness of the membrane of the urethra, when we consider how very vascular it is. This vascularity is made more apparent by the accession of inflammation than by injections. When the urethra is inflamed, the crowd of minute vessels which pervade its inner membrane is very great; this is best seen in the inflammation of gonorrhœa, the seat of which is within two inches and a half of the anterior extremity of the urethra, or where we have an opportunity of observing the inflammation when translated to the neck of the bladder and posterior part of the urethra."

"*Ulceration of the Urethra.*—I am not inclined to believe that ulceration is ever the direct effect of inflammation of the membrane of the urethra; it is a consequence rather of an inflammation of the lacunæ, or glands, or it results from the opposition to the push of urine by a stricture or other obstruction."

"*Loss of Elasticity in the Urethra.*—The effect of a certain degree of inflammation on the membrane of the urethra is an increased discharge, and the loss of its natural elasticity. The membrane of the urethra having a ready disposition to discharge profusely when suffering inflammation, is not liable to form bands, and to be thickened and strengthened, as the serous membranes and common cellular membranes. The common cellular texture on being pressed and a little inflamed will quickly be condensed into a ligamentous firmness; this we see in aneurisms and hernia, around swellings of the glands and abscesses; so will the peritoneum, or pleura, or pia mater, or any other membrane being inflamed form bands and new processes. But, although the membrane of the urethra be not so liable, on slighter attacks of inflammation, to lose its elasticity, and become callous, and have strictures formed on it, yet every violent or long continued inflammation produces this consequence."

The urethral glandular fabric, and the other parts of this canal, under the heads—*Cowper's gland*—*Fistula from Cowper's Gland*—*Glands of Littre*—*Form of the Urethra*—*Fossa Navicularis*—*Verumontanum*—*Sinus Pocularis, &c. &c.* we should be pleased to present to our readers, did not the bounds to which we are confined forbid. Some of these parts are, however, too interesting to pass entirely without notice, though we must not go into the detail. What has been called *Foramen cœcum*, our author denominates *Sinus pocularis*, because it is not a foramen, but a "vesicle of a peculiar use." Its situation is in the verumontanum, and its use is to protect the seminal vessels, which are without valves, from the intrusion of the urine. The *Sinus pocularis* has a peculiar sensibility, which is manifested when a bougie accidentally passes into it

"for although the urethra has not been in any degree irritable, when the bougie hitches upon this sinus, the patient can no more bear it, than he could remain with his eye-lids open, and permit a straw to be run into his eye." The specific sensibility of this part, and its consequences on the seminal vessels and testicles, promise to form an interesting portion of this work, intended to be employed on diseases of the spermatic cord and testicle, as derived from the urethra. Before entering on a brief description of the plates of this Fasciculus, we must stop a moment to cite Mr. Bell's application of a practical fact, deduced from the size and structure of the orifice of the urethra.

"The orifice of the urethra is naturally the narrowest part of the canal. It is strengthened by a ligament which does not admit of dilatation. The capacity of the orifice of the urethra is, therefore, the measure of the size of the bougie which we use in sounding the canal, since an instrument which can pass into the urethra, ought, without obstruction, to pass into the bladder; and if it be obstructed, it must be owing either to stricture, or to an ill adaptation of the form of the instrument to the canal, or to an aukwardness in the motion of the hand."

Nine of the plates of this Fasciculus* are intended to exemplify the consequences of the loss of elasticity in the urethra from inflammation, and the varieties in the form and extent of the obstructions thus occasioned. The fourth plate, with which the morbid anatomy of the urethra commences, exhibits the urethra and bladder laid open, shewing two strictures, and some other irregularities in the canal. The object of this plate, and the remarks connected with it, seem intended to shew the advantage of the urethra-sound over the common bougie in detecting stricture, and of the advantages that may arise from the employment of caustic in the particular form of stricture here exhibited. Mr. Bell concludes his observations on this plate with the following practical fact.

"I do not recollect," says Mr. B., "that it is any where set down as a precaution to the surgeon, that the bougie does not bring on dangerous symptoms by its introduction, but by the manner in which it is withdrawn. For thus it happens, that a wax bougie introduced through a stricture (which I may observe always

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* The whole number of the plates is twelve. The first and second are not employed on any morbid state, but are illustrative of the anatomy of the urethra and neck of the bladder—of the manner of introducing the catheter and bougie, so as to avoid the check from the ligamentous connections of the canal:—the third represents a diseased prostate, the third lobe projecting into the bladder, with a catheter introduced into the bladder, under this circumstance.

possesses a certain degree of elasticity), meets with little resistance; but when the bougie is permitted to remain, the wax softens, and the sharp stricture sinks into it, so that when the bougie is withdrawn, there is much violence done before it is disengaged. In using the wax bougie, but more especially the catgut bougie, we have to guard against this setting of the stricture into the soft bougie. I fancy it is this effect which some attribute to spasm in the stricture: but putting that question aside, and considering the matter practically, this is the thing most of all to be avoided. What in the wax bougie is the consequence of its softening, is to be apprehended still more from the untwisting of the fibres of the catgut bougie. I have witnessed total obstruction of urine, and death, in consequence of the improvident use of this bougie."

The fifth plate contains representations of five different kinds of strictures in the urethra. The first kind is a stricture with an ulcerated surface; and connected, as the plate is intended to shew, with a thickening and loss of elasticity in the spongy body of the urethra. The second is an example of a remarkable contraction of the urethra, accompanied with a wasting of the corpora spongiosa. The third is the simplest form of stricture. The fourth exhibits a portion of the penis with the bougie pushed into a false passage. The fifth represents a portion of the penis and bladder, with examples of the bridle stricture.

The observations on this plate inculcate a cautious use of the means employed, especially caustic applications, to remove stricture: and two instances are recorded of stricture in the œsophagus produced by swallowing caustic alkali.

The sixth plate, of four figures, tends to shew to what degree of contraction inflammation will reduce the urethra.

Plate seven exhibits the consequence of stricture on the bladder, but especially on the neck; and represents a striking instance of error in the practice, and formation of a false passage by the use of instruments.

It would appear, *à priori*, that the pain occasioned by boring through the membrane of the urethra, in the first instance, and the disturbance given to the structure of the parts, in the second, would prevent the commencement of the injury, and suspend its continuance. This, however, is not the actual fact; for, under this rude operation, whether by the surgeon or by the patient himself, considerable mitigation of suffering is experienced. Our author endeavours to explain this, but we are not certain that he has succeeded: his explanation wears rather too much the air of an hypothesis. But the whole of his remarks on this plate, and the plate itself, deserve the serious regard of practitioners.

The eighth plate shews the effect of *lunar caustic* on a stricture.

This is on a subject of great importance, and on which opinion has varied to the utmost limit of discordance. It has produced a short, but ingenious disquisition on the employment of caustic in disorders of the urethra, from the author; in which it is shewn, that a refinement of distinction in the use of this formidable weapon (as we venture to call it) is required, which nothing but extensive practice and close observation can give. Unfortunately, however, most of the alarming symptoms arising on the application of caustic, have happened to those whom extensive practice has made bold and careless.

Plate ninth shews the effects of ulcer destroying a part of the urethra; and, in a second figure, gives a remarkable example of calcarous matter lining the urethra behind the stricture, with a disease of the prostate, the consequence of stricture.

Plate tenth has three figures: the first represents the urethra and bladder, with a small calculus sticking in the urethra. In this instance a round stone, impeded by a trifling stricture, stuck in the passage; and the patient died of the effects of retention of urine. The second figure represents a simple stricture at the bulb of the urethra, with the urethra-probe introduced. The third exhibits the bladder and urethra, with a stricture at the bulb of the urethra, which will only permit a bristle to be passed through. In this instance, the surgeon meeting with a very narrow stricture, and encountering the difficulties of the turn of the passage at the same time, tore the membrane of the urethra.

The eleventh plate, shewing a stricture at an inch and a half from the orifice, a narrowing of the canal for the space of two inches, and a stricture of the common kind, in the most frequent place just behind the bulb of the urethra, is indeed of importance to the student, *if* from it may be learned when it is necessary to use the caustic in preference "to the bougie; when to prefer the use of the bougie to that of the caustic;" *if* from it he "may also learn how fistulous openings form; and may understand the peculiar difficulty of treating the stricture which takes place behind the bulb of the urethra." We are ready to admit the value of this plate, and the ingenuity of the author's explication; and we wish most sincerely, that it taught fully these valuable points and much more, on a state of morbid alteration, more productive of mental and corporeal pain, than perhaps any other malady.

Plate twelfth gives a view of the urethra and bladder of a person who died in consequence of stricture and fistula in perinœo, and is the only one which is given from a preparation

not in the author's own collection. There are no observations made on it; because we suppose, the subject of fistula in perinœo is to be continued in the succeeding Fasciculus.

A work, consisting principally of plates, and deriving most of its value with the Profession from that source, presents but little for critical examination. We anticipate the utility of the direction which Mr. Bell has given to his talents; and we wish every possible success to his labours, because we know society must be benefitted in a ratio agreeing with that success. We cannot dismiss the work, however, without remarking on the increase of that morbid state of the urethra, which is the subject of this Fasciculus. From whence can this arise? The virulence of the syphilitic virus is probably on the decline; the violence of the symptoms of Gonorrhœa, whether depending specifically or by any modification, on this virus, have, by modern treatment, been much abated; and yet the sequelæ of gonorrhœa are much more frequent, and much more formidable than in the days of old Daniel Turner. From whence can this arise? Are we indebted to astringent injections for this, or to the uninformed busy medlers with bougies? The fact seems undoubted: the cause is worth looking after.

II.

ΙΑΤΡΙΚΗ, *seu Novum Nosologiæ Methodicæ Systema.* Auctore F. Swediaur, M. D. 2 vols. Octavo. Paris, 1812.

(Concluded from Page 142.)

Our author next proceeds to the third class, *Dyserethisiæ* and *Dysæsthesiæ*, which correspond with *Neuroses* of Cullen. It is obvious that he has named this class from Ερεθισις, irritability, and ΑΙΣΘΗΣΙΑ, sensibility. He gives the following character, "*Morbi ex irritibilitate fibrarum motricium, seu muscularium; vel ex sensibilitate nervorum aut sensorii communis abnormi auctâ; vel imminutâ, aut abolitâ.*" This class is divided into six orders. *Eclyses*, *Spasmi*, *algemata*, *Dyskinesiæ*, *Dysorexiæ*, and *Paranoiæ.* The enumeration of them is preceded by some general observations on irritability and sensibility, and concluded with an ingenious attempt to explain the causes of different temperaments of the human body, by the various degrees of susceptibility of excitement *(incitibilitas)*, and the variable state of the animal fibre.

ECLYSES, or diseases of debility, are subdivided into *Anerethisia*, or want of irritability; *Anæsthesia*, insensibility; *Asthenia*, weakness; which is treated of much at large in a general and local sense. *Cataphora*, or a morbid tendency to sleep (lethargy), *Apoplexia*, *Paralysis*, *Syncope*, *Aspnœaphyxia*, or apparent death, of which he has noticed eleven species, and many varieties, deserving attentive consideration.

SPASMI, or unusual contractions of muscular fibres, are distinguished into 1. *Tonic*, as *Tetanus*, or general contraction; and *Spasmus* or *Crampus*, or local contraction; and 2. *Clonic*, or the alternate contraction and relaxation of muscles, called convulsions, of which he has given several species and varieties. *Epilepsia*, *Ballismus* or *Chorea*; *Ptarmus*, or *Sternutatio*, *Lygmus*, or hiccough; *Hyperemisia*, or vomiting; and *Myrmekiasis*, or the *Raphania* of Cullen.

ALGEMATA, or pains, are arranged in twenty-six genera, and preceded by some general observations, or cautions to practitioners, to remind them, that an uneasy sensation may exist in a part which is not the seat of primary disease, as itching of the nose from worms, head-ache from oppressed stomach, &c.

Many of the genera are named as in Cullen's Nosology, and familiar to our readers; others are derived from Greek words, of which the etymology becomes obvious on inspection, and, therefore, does not require to be explained. *Cnesmus*, or itching, both general and topical, is minutely described; and *Kephalagia*, or head-ache, has occupied much of our author's attention. *Gasteralgia* and *Enteralgia*, being also subjects of high interest, are treated of with accurate minuteness. *Osphyalgia*, or lumbago; and *Ischialgia*, or sciatica, are distinguished by several species and varieties.

DYSKINESIÆ. This order of diseases is thus characterized: "*Motus musculorum, aut sensationes nervorum; vel functiones* "*organorum turbatæ aut impeditæ*;" and it is divided into twenty genera. A few general observations are made on the difference between the disposition to elastic contraction of the muscular fibre (*contractilitas elastica*), and the disposition to contract from irritability (*contractilitas irritibilitatis*), the former being passive and remaining after death, until the body goes into a state of decomposition, or putrefaction; the latter active, inherent in the muscular fibre, and ceasing to exist soon after death; and he then proceeds to enumerate *Hypererethisia*, or excessive irritability of muscular fibres, and *Hyperæsthesia*, or too high a degree of sensibility, or sensibility of the brain and nerves; and *Hyperkinesia*, or too great a disposition to excitement (*incitibilitas nimia*).

As such an infinite train of diseases follows disturbed sen-

sation, and Dr. Swediaur appears to have devoted much attention to them, to impress his readers with the necessity of making correct distinctions, we trust it will not be considered improper to give the definitions, or descriptions, in his own words.

"Hypererethisia. *Fibrarum muscularium promptitudo ad motum justo major; seu contractiones musculorum ab applicato stimulo ordinario et consueto, vel a stimulo solito leviore, abnormes.*

"Hyperæsthesia. *Mutationum in sensibus externis, in sensorio communi, aut in nervis per corpus distributis excitatio justo major, aut facilior, a stimulo solito applicato; vel actionum in systemate nervoso generatio a stimulo solito leviore applicato.*"

"Hyperkinesia. *Sensibilitas nervorum et sensorii communis, æque ac irritibilitas musculorum nimia, id est, hyperæsthesia cum hypererethisia juncta. Sensationes et motus, vel functiones organorum ac viscerum variorum corporis abnormes, turbatæ, modo nunquam constante, sed indies variante; mens mire mutabilis, nunc summe læta, mox gravi tristitia obruta, ad iram proclivis, simulque ad minimas in corpore mutationes attenta; metus constans periculi, suffocationis, paralysis, apoplexiæ, mortis; vertigo; tinnitus aurium; leiopthymia; insignis et peculiaris animi dejectio; repentini terrores; subitanei calores sudoresque; oscitatio frequens; anxietas, inquies, oppressio; palpitatio cordis vel arteriæ cœliacæ insolita; modo spasmi aut convulsiones, modo dolores violenti, nunc hanc, nunc aliam corporis partem afficientes, sine ulla causa apparente subito disparentes, vel redeuntes; frigus extremitatum, præcipue pedum, fere constans, dum, eodem tempore, partes internæ aut facies, sæpe calore intenso uruntur. Morbus utplurimum subito et inopinate post intervalla irregularia, longiora vel breviora, maxime ex animi pathematibus prægressis revertens, symptomatibus numerosissimis lævioribus, vel gravioribus stipatis.*"

Hyperkinesia is subdivided into *cerebral*, *gastric*, *hysteric*, or *uterine*, febrile, and mixed, or complicated, and enumerates many species of each. In this order we find *Rhembasmus*, or sleep-walking, with some curious observations on this extraordinary affection. *Vertigo* is called *Ilignus* and *Palpitatio*; *Cardiopalmus*, *Tussis* is also named *Bexis*, *Oneirodynia gravans* is here seen under the title of *Pnigalion*; and *Angina pectoris*, *Pnigophobia*. *Dyspepsia* is described by the usual terms; and a few general remarks on the theory of digestion are subjoined, which are the result of attentive observation of this important function in a state of health and disease.

Dysorexiæ, or diseases arising from a false or depraved appetite. It is characterised "*Desiderium pro cibo aut potu capiendo abnorme, depravatum, immoderatum; vel imminutum, aut omninò abolitum.*" It contains five genera. *Bulimia*. *Kitta*, or a desire of eating unusual things, as chalk, coals, leather, &c. *Polydipsia*, *Anorexia*, and *Adipsia*, or extraordinary want of thirst.

Paranoiæ, Aberrations of intellectual functions, is the last order of this class, and are thus described: "*Functiones sensorii communis: judicium, ratiocinum, imaginatio vel memoria, abnormes, ex vitio hereditario, connato vel acquisito*

ortæ; quandoque epidemicè regnantes; vel periodicæ, annuæ aut lunares."

Dr. Swediaur has prefixed some general observations to this order (the *Vesaniæ* of *Cullen*), of which the following may be considered an abstract. The essential quality of the mind, or common sensorium, consists in a power of representing. The mind represents the state of its own body by means of internal sensation; and every thing else (*mundum*) by the medium of the external senses. By that peculiar faculty, which we call the *Imagination*, it possesses a power of repeating the changes excited in the brain by internal sensation, or received by the external senses, and of renewing them without an external object, by means of the reason, or judgment. In a perfect and healthy state of the brain, the power of perceiving and representing objects, and of reasoning on them, is conformable to their reality; but, in its morbid state, various degrees of aberration of the intellectual faculties are found to exist; and, as these diseases were called by the Greeks, *Paranoiæ*, our author has restored that name.

A false sensation of a person concerning the state of his own body, or erroneous and extraordinary sensations conveyed to the brain by the external organs of sense, create incorrect ideas (*imaginationes*) and erroneous reasonings, and, these being imbibed and fixed in the mind, irregular aversions and desires are generated, which neither correspond with the thing represented, nor with each other. A patient in this state often takes an imagination for a reality; and, vice versâ, believes the reality to be imaginary; thus judging improperly both as to his connection with the world, and of the state of his own mind and body; and does not permit a correction of this faulty imagination, but is deaf to every argument, and considers those to be fools who think and decide differently from himself: besides, his memory is also fallacious, and he is unable to repeat those things, which he had, just before, said and done, in consequence of a defect in that faculty of the mind.

This order is subdivided into *Hypomoria*, or sub-dementia, called in English crack-brained. *Paracope*, or febrile delirium; *Mania*, idiopathic, sympathic and symptomatic, of which many species are enumerated. *Chæraphrosyne*, or fatuity. *Erotomania*, or sentimental love; *Athymia* (*Melancholia* of Cullen). *Nostalgia*. *Apanthropia*, or *Misanthropy*. *Agriothymia*, or ferociousness of character, one species of which he defines, "*Desiderium effrenatum alios homines, vel populus subjugandi, aut exterminandi.*" This is a new species of disease, or, at least, never before noticed in a nosological work: the author's long residence at Paris, we presume, may have afforded him an opportunity of studying it very particularly. *Misopsychia*, or

weariness of life. *Moria*, or Idiotism (*Amentia* of Cullen), and *Amnesia*, or loss of memory, bring us to the close of the third class of diseases.

The fourth class, *Cachexiæ et Cacochymiæ*, is more copious than the *Cachexiæ* of Cullen, and includes many diseases which, by the latter, are ranged under the head *Locales*. The general character of this class is, "*Habitus, vel humores corporis depravati.*" A few observations on the solids and fluids of the human body, and a chemical analysis of them, precede this division of the work.

The first order in Dyschymiæ, or diseases from a morbid state of the fluids, is expressed in the following terms: "*Status fluidorum corporis humani, abnormis, seu humores quantitatis excessu, vel defectu, aut qualitate vitiata precantes.*" It is subdivided into three sections:—Polychymiæ, or diseases from a superabundance of fluids; in which are enumerated *Polyhæmia*, or *Plethora*; *Polyblennia*, or excess of mucus; *Polychylia*, or too much bile, &c.—Olygochymiæ, or diseases from a deficiency of fluids; and Dyscrasiæ, or those caused by a morbid state of the various humours, distinguished by the names of *Dyshæmia*, *Dysblennia*, *Dyschylia*, &c. &c. The two first sections do not contain any thing different from the account of similar affections of the system, as described by Cullen; but the last takes a wider range, and reminds us of the humoral pathology of Boerhaave and other writers, who have favoured the opinion that this is a prolific source of disease. The section is designated by this general character, "*Humores quicunque corporis miscellâ vitiosâ, aut qualitate chemicâ peccantes;*" and distinguished into primary and secondary. Under the head of *Dyshæmia*, which has five species, and numerous varieties, our learned and industrious author has displayed much acuteness and analytical research; and his *Dyscrasia* "*a fluidis loco aberrantibus*," is not unworthy of notice.

The second order of this class, Dystoniæ, is distinguished into *Hypertonia* and *Atonia*, and contains nothing which requires elucidation or remark.

The third order, Marasmi, is divided into five genera. 1. *Phthisis*, or *Tabes*; which is subdivided into three species; *purulenta*, or *ulcerosa*, including *Phthisis pulmonalis*, or *trachealis*; *intestinalis*, or *abdominalis*, &c. 2. *Pituitosa*; and, 3. *Sicca*, or *nervosa*; which is distinguished into several varieties. 2. *Atrophia*, or general atrophy, described in the usual terms. 3. *Pædatrophia*, or the atrophy of infants. 4. *Melatrophia*, or local atrophy; and, 5. *Syntexis*, or sudden and fatal wasting of the body by fever and diarrhœa.

The fourth order, Excedeses, contains eight genera.

1. *Polypiates (Polysarcia* of Cullen). 2. *Pneumatosis.* 3. *Tympanites.* 4. *Emphysema.* 5. *Hydrops;* with its several species, *Hydroderma (Anasarca); Hydrokephalus; Hydrorachia (Spina bifida); Hydrothorax; Hydrohystera, (Hydrometra);* &c. 6. *Emphraxis (Physconia* of Cullen); which is traced through the abdominal viscera with great minuteness. 7. *Choiras*, or scrofula; so named by a preference to the Greek χοιρος; and, 8. *Elephantopus.*

The fifth order, Dyschroiæ, or *Cachexiæ decolores*, contains six genera: 1. *Leucophlegmatia;* 2. *Chlorosis;* 3. *Icterus;* 4. *Scorbutus;* 5. *Peliosis;* or livid spots on the skin; and 6. *Arteriochalasis*, or Aneurism.

The sixth order, Helcoses, or *Cachexiæ ulcerosæ*, is divided into five genera: 1. *Aptha*, many species of which are described; 2. *Thymiosis (Frambœsia);* 3. *Syphilis;* 4. *Carkinoma*, of which we find a particular description, and a few general observations, without affording any new information; 5. *Elephantiasis.*

To the seventh order, *Dermatodes*, or *Cachexiæ cutaneæ*, some general observations on cutaneous diseases are prefixed, to prove that they are seldom entirely local, but, usually, dependent on a cachetic state of the habit, requiring the exhibition of internal remedies at the time topical applications are employed; and he notices the frequent appearance of more severe diseases, as affections of the lungs, stomach, brain, &c. when these are removed by external means alone.

This order is divided into eleven genera; *Alphus, Lepra, Psoriasis, Psora, Herpes, Epinyctis, Phymatosis, Pityriasis, Tinea, Achor, Trichoma:* but although our author deserves much credit for the simplicity of his arrangement, when compared with many of his predecessors; yet, from the clearness and precision of his definitions, the work of the late Dr. Willan, and the judicious compendium edited by Dr. Bateman, are infinitely superior to the works of every foreign writer that we have seen on this subject, Alibert's splendid trifle not excepted.

The eighth order, Scolecodes, or *Cachexiæ verminosæ*, is divided into three genera: 1. *Entomiasis*, or a disease caused by the production of insects, which is subdivided into several species, corresponding with the irritating cause, pediculus; pulex, cimex, culex, vespa, &c. 2. *Scolekiasis*, or the cutaneous affection by various worms; by hydatids; the leech, muscles, &c. 3. *Helminthiasis*, or the worms infesting the intestinal canal, the *Ascaris lumbricoides*, *vermicularis;* and *trichiura.* The *tenia cucurbitina; vulgaris;* and *lata.* Our author observes, that three species of tenia only have been discovered in the human subject, although many others have been detected in the intestinal passage of dogs, cats, and fish:

he says, that no universal remedy for the tenia has been discovered, but that each species requires a different medicine to effect its expulsion.

The ninth order, Lithiases, or *Cachexiæ calculosæ*, aut potiùs *salinæ*, is divided into five genera, of which the first is *Podagra*, described with considerable discrimination, to which we find a note subjoined, deserving attention, both from the importance of the subject and the respectability of the writer, as a man of much experience. See vol. 2. p. 255. He considers the proximate cause of gout *(causa materialis)*, notwithstanding what Cullen and other modern physicians may have said to the contrary, to be a humour of a peculiar nature, generated in the mass of blood, retained, accumulated, and expelled by the power of the system *(vi naturæ)* to the extremities, where it is occasionally deposited; and alludes to the chemical analysis of gouty concretions by Dr. Wollastan.

The second genus of this order is *Urolithiasis*, or the formation of urinary concretions in the kidneys, ureters, bladder, and urethra. 3. *Cholelithiasis*, or biliary calculus. 4. *Enterolithiasis.* 5. *Splanchnolithiasis*, and the various stony concretions in different parts of the body.

The tenth order, *Dystoses*, or *Cachexiæ osseæ*, is preceded by a few observations on the chemical analysis of bone. It is distributed into seven genera. 1. *Osteomalakia (Rachitis)*, with some pertinent remarks on this disease of infants, and the *mollities ossium* of adults. 2. *Osteopsathyrosis*, or unusual fragility of bone. 3. *Exostosis.* 4. *Osteosteatoma.* 5. *Osteophthoria*, or the various degeneration of bone from *caries*, &c. 6. *Teredon*, or *Caries.* 7. *Osteonecrosis (necrosis)*.

The fifth and last class of diseases is called by our author *Morbi* topici, *seu* locales, and divided into ten orders. The first, *Dysæstheteriæ*, is thus characterised: "*Functiones sensuum externorum abnormes; excessa, defectu, aut depravatione peccantes.*" It is subdivided into five sections: 1. *Dysopsiæ*, or diseases causing imperfect vision; which are treated of under several heads, to which appropriate Greek names are given. 2. *Dysecoia*, or affections of the auditory apparatus. 3. *Dysosphresiæ*, or various derangement of the sense of smelling. 4. *Dysgensiæ*, or similar disorders of the sense of taste; and *Dyshaphiæ*, or those which are produced by a morbid state of those parts which constitute the organ of touch.

The second order, Dystaliæ et Dysphoniæ, comprehends the diseases from an imperfect state of those organs, which are employed in the speech and voice; in which we find *Atalia*, or dumbness, divided into four species: *Psellismus*, or hesitation of speech, called stuttering or stammering, of which we find eight species distinguished; and, under the head *Dysphoniæ*,

will be found *Aphonia*, or loss of voice; *Paraphonia*, or depraved voice.

The third order is DYSGENNESIÆ, characterised in these words: "*Functiones organorum generationis abnormes, nimis auctæ, vel deficientes, aut omnino impeditæ*," and divided into two sections relative to either sex. The first, concerning the male, is subdivided into five genera. 1. *Hyperorgosis*. 2. *Priapismus*. 3. *Astysia*. 4. *Dyspermasia*. 5. *Spermacrasia*. The third genus (*Anaphrodisia* of Cullen), is described with great minuteness as an idiopathic, sympathic, and symptomatic disease. The section concerning the female, includes seven genera. 1. *Machlosyne* (*Nymphomania* of Cullen). 2. *Dyssynusia*. 3. *Steirosis*, or Sterility. 4. *Ectrosis (abortio)*, distinguished as idiopathic, sympathic, and symptomatic. 5. *Dystokia*, or difficult parturition. 6. *Pseudokyesis*, or false conception; and 7. *Parakyesis*, or extra-uterine conception.

The fourth order comprehends EVRYANGEIÆ, the character of which is an improper dilatation or size of vessels. Seven genera are enumerated: 1. *Cardieurysma*, aneurism of the heart. 2. *Aorteurysma*. 3. *Artereurysma*. 5. *Phlebeurysma (varix)*. 6. *Lympheurysma*, or permanent dilatation of a lymphatic vessel; and, 7. *Splanchneurysma*, or a continued and unnatural dilatation of any of the viscera: under which head are enumerated these morbid affections of the intestines, stomach, gall-bladder, &c.

The fifth order includes STENEANGIÆ, or diseases of permanent contraction of vessels and other cavities, it is divided into, 1. *Stenosis*, or stricture, considered as a passive state of the parts, subdivided into fifteen species, corresponding with the seat of the affection, as *Stenosis narium; faucium; œsophagi; pylori*, &c. &c.; to each of which is superadded a Greek name; and into 2. *Anxis*, a strangulation, or violent contraction of a part, which is also subdivided into several species; as, *Anxis herniæ; intestini; uteri; aut vaginæ uteri;* and *balani (paraphimosis)*.

The sixth order, ONCOSES, seu TUMORES, comprehends a multitude of genera (72). It is divided into eight sections: 1. *Tumores inflammatorii*; 2. *Tumores sequelæ phlogosis*; 3. *Sanguinei*; 4. *Aquosi*; 5. *Aërei*; 6. *Glandulosi*; 7. *Organici*; 8. *Saccati*.

It would become tedious to our readers to follow the scientific and industrious author through all the genera and species of this part of his subject, which occupies above two hundred pages, and is arranged with an attention to minuteness so conspicuous in German authors and commentators on every subject. Dr. Swediaur's theory of tumours will afford a tolerable explanation of his arrangement; he says, Tumours of the human body seem to arise from four causes: 1. From excited action, or

the increased activity *(motu)* of the secreting vessels of a part. Secondly, from a diminished action of the absorbent vessels. Thirdly, from an alteration of the reciprocal, or duly corresponding action of the secreting and absorbing vessels; and, Fourthly, from a depraved state of the fluid conveyed to the part *(ex vitio humoris ad partem allati).*

From those causes he makes a distinction of tumours into, 1. Those which arise from an undue accumulation of the accustomed fluid of a part. 2. Those which are produced by another fluid, carried to a part, and there deposited, as milk, urine, &c. including metastases of various kinds; and, 3. Those which contain a humour which had been of healthy quality, but, afterwards, sustains a morbid change in the part.

Other causes of difference in tumours are considered to proceed from, 1. The peculiar organization, structure, or number of vessels of the affected part. 2. The greater or less degree of irritability and sensibility. 3. The contents. 4. The age of the patient. 5. His particular habit of body. He then proceeds to describe the different external character of tumours by their form, colour, elasticity, hardness, degree of adhesion to the skin, and surrounding parts, pain, celerity, or tardiness of growth, and their ulceration.

A theory of inflammatory tumours is prefixed to the first section, in which the preceding observations on *Phlegmasiæ* are referred to; and, following the principles there explained, this section is subdivided into three distinct kinds of external inflammatory tumours.

1. *Phlogismata,* or those which are seated in the cellular membrane, or adipose membrane of the skin, or in a subcutaneous gland, usually going into suppuration, sometimes into induration, or gangrene.

2. *Epiphlagismata, seu phlogoses,* or those which exist in the mucous membrane, upon the external surface of the body, or the nostrils, fauces, urethra, vagina, &c.

3. *Inophlogismata, seu phlogoses membranæ fibrosæ,* or those which take rise within the *involucra* of the muscles *(in vaginis musculorum),* or in tendons, ligaments, capsulæ of joints, bursæ mucosæ, or periosteum, and never go into suppuration, unless accompanied with inflammation of the cellular membrane they are violently painful, and sometimes terminate by the extravasation of a peculiar matter in the joints, causing *anchylosis,* or hard moveable concretions.

The first section contains the Phlegmon: *Dothien* (furunculus); *Cauma,* a burn; *Chimetlon* (Pernio) *Adenitis,* or inflammation of a subcutaneous gland, and similar affections of the various mucous membranes. The second section, comprising tumours subsequent to phlogosis, includes *Apostema,* or abscess,

described as an inflammatory tumour going into suppuration, and receiving its name from the part in which it exists, as *Apostema Enkephali; Auris; Labiorum, Auris; Mammarum; Abdominis; Hepatis;* &c. *Diadexis (metastasis)*, thus described: "*Humoris cujusvis ex unâ corporis parte in aliam migratio aut translatio abnormis;*" of which sixteen species are enumerated: *Purulenta; Ichorosa; Mucosa; Lactea; Sanguinea; Podagrica; Erysipelatosa; Syphilitica;* &c. *Gangræna; Sphakelus*, and *Anthrax*.

The third section *(tumores sanguinei)* includes *Aneurism, Varix*, and *Ecchymosis* of various parts. The fourth comprehends *tumores aquosi*, divided into sixteen species, and named from the affected part. The fifth section *(tumores aërei)* are arranged in a similar manner.

The sixth section comprehends glandular tumours; and under the head of *Adenosclerosis*, our author describes a hard, indolent, glandular tumour of the chronic kind, sometimes going rapidly into suppuration after contusion, but never becoming cancerous, although it has been called a Scirrhus by practical writers. This, however, is distinguished as another genus, and described in the usual terms. *Phygethlon (bubo)*, is the name given to the tumour of a lymphatic gland in any external part of the body, and is designated by the species of inflammation; as, *Phygethlon phlogisticum; Apostematosum; Seclerodeum; Ulcerosum; Gangrænosum; Skirrosum;* and *Carkinomatosum. Mastoncus*, or tumour of the breast or nipple, is very properly classed and named according to the structure of the affected part, and the nature of the deposited humour, and subdivided into Idiopathic and Symptomatic.

The seventh section comprises organic tumours, and described as tumours of the viscera and the other organs of the body, which are not glandular. Under this head will be found *Opthalmoncus*, or tumour of the eye. *Blepharoncus*, or swelling of the eyelids; *Staphyloncus*, enlargement of the uvula; *Deironcus (bronchocele)*, which we are told is an endemic complaint in various parts of India, and even in the torrid climate of Sumatra. "*Hic morbus singularis, non solum in pluribus Europæ regionibus alpinis frequens, sed et sub zonâ torridâ in insulâ Sumatrâ et in provinciâ Indiæ Orientalis Deccan dictâ; nec non in Montibus Bootan, Thibet, Assam et Tipra, eorumque vallibus endemicus occurrit.*" *Hepatoncus (tumor hepatis), Splenoncus, Nephroncus, Kystoncus*, &c. &c., are enumerated in this division of the subject.

The eighth section includes encysted tumours, which are distinguished from excrescences by some appropriate remarks; they are described by the same characters and names as in the works of other nosologists, *Steatoma, Atheroma, Ganglion*, &c.

The next, or seventh order of the fifth class, is named Ecphyses *seu Excrescentiæ*, thus characterised: "*Excrescentiæ seu tumores in quacunque parte externâ protuberantes, firmi et renitentes; nec mobiles, nec tunicâ peculiari inclusi.* They are divided into soft, as *Encanthis*, *Epulis*, *Hypersarcosis*, or the common fungus of ulcers; *Mykosis*, or the excrescentiæ fungosæ of authors. *Polypus*, *Sycosis*, or *Condyloma* and hard, as *Acrochordon* (*verruca*), *Tylosis* (*clavus*), and *Porosis*, or induration of the cuticle from pressure.

The eighth order, *Ectopiæ.* "*Pars ex suâ sede normali dimota, plerumque externè tumorem causans.*" We find eleven genera under this head. 1. *Kele*, *seu Hernia*, described as by other authors. 2. *Proptosis* (*prolapsus*), of the various viscera. 3. *Anastrophe*, or inversion of a part. 4. *Hysteroloxia.* 5. *Ectropium*, or eversion of a part. 6. *Entropium*, or introversion. 7. *Streblosis*, or distortion. 8. *Parectasis*, or subluxation. 9. *Exarthrosis*, or complete luxation, in which every possible dislocation of bones is minutely described and enumerated into twenty-one species. 10. *Dysarthrosis*; and, 11. *Diastysis*, or the separation of bones from their natural connection.

The ninth order, *Dialyses*, "*Solutio continui, visu, tactuve manifesta.*" This is divided into ten genera: 1. *Ecdarsis*, or excoriation. 2. *Rhagas*, or fissure. 3. *Helcos* (*ulcus*), in which our intelligent author displays so much ingenuity and research as to enumerate thirty-four species, and occupy sixteen pages, in descriptions of their difference. 4. *Syrinx*, or fistula. 5. *Thlasma*, or contusion. 6. *Rhexis*, the rupture or laceration of vessels, viscera, tendons, or membranes. 7. *Trauma* (*vulnus*). Wounds are distinguished as simple, complicated, and poisoned by the bite of rabid animals and noxious reptiles and insects; they are also described according to the structure of the part, whether vascular, nervous, tendinous, &c. 8. *Catagma* (*Fractura*). 9. *Tereden*, or *Caries*; and, 10. *Osteophthoria*, before described amongst diseases of bone (*Dyostoses*).

The tenth order, *Amorphiæ*, or deformities, is divided into four sections: 1. Organic; 2. Cutaneous; 3. Cacothric, or concerning the hair; and, 4. Coconic, or relative to the nails.

The first section is divided into fourteen genera: 1. *Atresia*, or imperforation, and subdivided into various species, corresponding with the affected part. 2. *Symphisis.* 3. *Diaschisis*, or unnatural separation, as the hare lip, fissure of the palate, &c. 4. *Ectopisis*, or unusual situation of the viscera and of excretory ducts. 5. *Chalasis*, or undue relaxation of parts. 6. *Hyperepidosis*, or excessive increase. 7. *Meiosis*, diminution, or extenuation. 8. *Plethomeria*, or redundancy. 9. *Leipomeria*, or deficiency. 10. *Hyboma*, or gibbosity. 11. *Kyllosis*, or natural curvation. 12. *Cholosis*, or lameness. 13. *Campsis*,

or chronic and morbid curvation; and, 14. *Acampsia*, or rigidity of the joints (*anchylosis*). Our author makes some remarks on the improper derivation of the word, and the confusion of ideas in its application to express the immoveable state of articulations.

The second section has six genera, expressive of cutaneous affections belonging to this order. 1. *Kelis*, or a spot on the skin, with eleven species. 2. *Spiloma*, or mole (*novus*). 3. *Phlyctæna*, a pustule. 4. *Papula*, a pimple. 5. *Ionthos*, a tubercle; and, 6. *Phlyzakion*, a vesicle (*bulla*).

The third section has eleven genera: 1. *Madesis*, or gradual thinning of the hair, without baldness. 2. *Phalacrosis*, or baldness. 3. *Poliosis*, or the change of the hair to a grey colour. 4. *Dasytes*, or excess of hair. 5. *Pogoniasis*, or premature beard. 6. *Chaitases*, or unusual thickness and hardness of the hair, resembling bristles. 7. *Leptotrichia*, the reverse of the last disease. 8. *Schizotrichia*. 9. *Liparotrichia*. 10. *Trichoma*; and, 11. *Trichiasis*.

The fourth section is distinguished by three genera. 1. *Onychogryposis*, a curvature of the nails. 2. *Onychoptosis*, or falling of the nails; and, 3. *Onichophthoria*, or morbid change in the substance of the nails (*corruptio unguium*).

Having perused these volumes with attention, and endeavoured to elucidate our author's arrangement with correctness, we must offer a few remarks on the comparative merits of his system of Nosology, and the manner of its execution. We have no hesitation in declaring it to be the most copious in matter, and methodical in manner, of any which has preceded it. The definitions or descriptions are correct, sometimes, perhaps, too minute, and bordering on prolixity, and form a striking contrast with the brevity of Cullen, whose definitions, on that account, are often defective.

The Latinity of our author is elegantly simple. The greatest part of the book must, necessarily, consist of technical terms, reiterated and varied; but the preface and introduction, the general observations and notes interspersed throughout, exhibit a purity of style, which is highly creditable to its author as a scholar, and resembles the admirable and classical diction of Dr. Gregory's *Conspectus Medicinæ Theoreticæ*. Both are worthy of a place by the side of Celsus, and are infinitely superior to the turgid periods of some modern Latinists. We entirely agree with Dr. Swediaur, that his book will be more extensively useful, by being written in a tongue which serves as a medium of communication to the *literati* of every age and country, and is less liable to variation than any modern language.

The declared preference of Greek etymology, and the infinity of new terms employed, may induce some of our readers

to consider that there is much affectation in this display of erudition. We do not wish to mistake words for things; yet, as the anatomical names of almost every part of the body, and of many diseases, are strictly Grecian, and could not be changed without much circumlocution, we must concede the propriety of taking the compound word from that source, and rather applaud than condemn an attempt to give unity to the nomenclature of a learned profession. The labours of Dr. Swediaur, in his Pharmacopæia Medici Practici, published in 1803, were appreciated in this country, and many of the names were either received into the last London Pharmacopæia, by a laudable imitation of a good example, or adopted, from a similarity of chemical reasoning, by those, who superintended that collegiate production. Many accurate and practical distinctions, and names of diseases, will be taken from these volumes by the present, or future teachers of medicine, who may not consider it necessary to deviate from the arrangement of their illustrious predecessor, Cullen, by the formation of a fifth class. We recommend the Novum Nosologiæ Methodicæ Systema to the Profession as a work of importance.

PART IV.

SELECTIONS.

I.

The Charter *of the* Royal College *of* Surgeons *in* London, *dated March* 22, 1800.

George the Third, by the Grace of God, of Great Britain, France, and Ireland, King, Defender of the Faith, &c. To all to whom these Presents shall come, Whereas our Royal Predecessor, King Edward IV., by certain Letters Patent, under the Great Seal of England, bearing date the 24th day of February, in the first year of his reign, did, at the supplication of the Freemen of the Mystery of Barbers of the City of London, using the Mystery or Faculty of Surgery, grant to them, among other things, that the said Mystery, and all the men of the same Mystery of the said City, should be one Body and Perpetual Community, and that two principals of the same commonalty, of the most expert men in the Mystery of Sur-

gery, might, with the assent of twelve or eight persons at the least, of the same community, every year elect and make out of the community, two masters, or governors, being the most expert in the Mystery of Surgery, to oversee, rule, and govern, the mystery and commonalty aforesaid.

And whereas by an Act of Parliament, made and passed in the 32d year of the late King Henry VIII., entitled for Barbers and Surgeons, after reciting, that, within the City of London, there were then two several and distinct companies of Surgeons, occupying and exercising the Faculty of Surgery, one company called the Barbers of London, and the other company called the Surgeons of London; it was thereby enacted, That the said two several and distinct Companies of Surgeons should from thenceforth be united, and made one intire and whole Body Corporate, and one Commonalty Perpetual, which at all times thereafter should be called by the name of the Masters or Governors of the Mystery and Commonalty of the Barbers and Surgeons of London; and by the same name to implead and be impleaded before all manner of Justices, in all courts, and in all manner of suits.

And whereas in and by certain Letters Patent, under the Great Seal of England, bearing date the 15th day of August, in the 5th year of the reign of His late Majesty, King Charles I., reciting, that the men of the same companies enjoyed divers liberties and franchises within the City of London, the suburbs and liberties thereof, by virtue of divers Acts of Parliament, and divers Charters, and Letters Patent, His said Majesty did grant and confirm unto the said masters and governors of the Mystery and Commonalty aforesaid, and their successors, all and singular the manors, messuages, lands, tenements, customs, liberties, franchises, immunities, jurisdictions, and hereditaments, whatsoever, which the men of the said companies then held, used, and enjoyed, by any lawful means or title whatsoever: And His said late Majesty did thereby give power to the said Corporation, to make annual elections of masters or governors of the said Commonalty, whereof two to be Professors in the Art and Science of Surgery; and also to elect and constitute ten of the Freemen of the said Society to be Examiners of Surgeons in London.

And whereas by an Act of Parliament, made and passed in the 18th year of the reign of our late royal Grandfather, King George II., intitled "An Act for making the Surgeons of London, and the Barbers of London, two separate and distinct Corporations," it was enacted, that the said Union and Incorporation of the Barbers and Surgeons of London, made and effected by the aforesaid Act of the 32d year of King Henry VIII., should, from and after the 24th day of June, 1745, be dissolved and declared void and of no effect; and that such of the members of the said United Company who were Freemen of the said Company, and admitted and approved Surgeons, within the Rules of the said Company, and their successors, should from thenceforth be made, and they were

thereby made and constituted a separate and distinct Body Corporate and Commonalty Perpetual, which at all times thereafter were to be called by the name of Master, Governors, and Commonalty of the Art and Science of Surgeons of London, and by the same name might implead and be impleaded, before all manner of Justices, in all courts, and in all manner of actions and suits, and take to them and their successors, lands, tenements, rents, or hereditaments, not exceeding the yearly value of 200*l.* in the whole.

And whereas We are informed that the said Corporation of Master, Governors, and Commonalty of the Art and Science of Surgeons of London, hath become and now is dissolved: And whereas it is of great consequence to the Commonweal of this Kingdom, that the Art and Science of Surgery should be duly promoted: And whereas it appears to Us, that the establishment of a College of Surgeons will be expedient for the due promotion and encouragement of the study and practice of the said art and science, now We, of our special grace and mere motion, and at the humble petition of James Earle, esquire, the late master, and divers other members of the aforesaid late Corporation of Surgeons, have willed, ordained, constituted, declared, given, and granted, and by these Presents, for Us, our heirs and successors, do will, ordain, constitute, and declare, give and grant, unto the aforesaid James Earle, and unto all the members of the said late Company or Corporation of Master, Governors, and Commonalty of the Art and Science of Surgeons of London, having been admitted and approved Surgeons, within the Rules of the said Company; and also unto all such persons, who upon, or since the dissolution of the said Corporation, shall have obtained Letters Testimonial, under a Seal purporting to be the Seal of the said late dissolved Corporation, authorizing them to practise the Art and Science of Surgery; that they, from henceforth for ever hereafter, shall be and remain, by virtue of these Presents, one Body Corporate and Politic, by the name of The Royal College of Surgeons in London, and by the same name shall and may have perpetual succession, and a common seal; with power to break, alter, and make anew the said seal, from time to time, at their will and pleasure; and by the same name shall and may implead, and be impleaded, before all manner of Justices, in all courts, and in all manner of actions and suits; and shall be at all times for ever hereafter persons able and capable in law to take, purchase, possess, hold, and enjoy, and shall and may take, purchase, possess, hold, and enjoy, a Hall or Council-house, with its appurtenances, situate within the cities of London or Westminster, or within one mile of either of them, for the use and purposes of the said College; and also any other lands, tenements, rents, or hereditaments wheresoever situate, lying and being; not exceeding, together with the aforesaid Hall or Council-house, and its appurtenances, the yearly value of one thousand pounds in the whole; without incurring any of the penalties in any statute of mortmain, or any

thing, in any statute of mortmain, to the contrary notwithstanding.

And it is our further will and pleasure, that nothing in these Presents shall be construed to give the Corporation of the City of London any power or jurisdiction over the said College hereby established and incorporated; and that no person, by virtue of these our Letters Patent, constituted or ordained, or hereafter to be admitted a member of the said College, shall be thereby entitled to any franchise belonging to the Freemen of the City of London.

And it is our further will and pleasure, and We do hereby, so far as We lawfully can or may, grant, and ordain, that the said Royal College of Surgeons, hereby incorporated, shall and may exercise and enjoy all and singular other the gifts, grants, liberties, privileges and immunities, possessions, real and personal, whatsoever and wheresoever, herein before-mentioned, or by any Act or Acts of Parliament, or by any Letters Patent, of our Royal Predecessors, Kings and Queens of England, given, granted, and confirmed unto, or otherwise lawfully acquired by, and belonging to the said late Master, Governors, and Commonalty of the Art and Science of Surgeons, or any of them, and not hereby altered, taken away, changed, or abridged, made void, or annulled*.

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* The privileges which the members of the Corporation obtained at different times, from the first incorporation of the Body by a Charter, in the reign of King Edward IV. were, liberty to practise Surgery, to the exclusion of unqualified persons; and the exemptions which were granted to them, were from the offices of watch and ward; from juries and inquests; and the bearing of armour. These were granted, at different periods, by Charters of the 24th of February, 1st Edward IV.; 5th of December, 15th Henry VII.; 12th of March, 3d Henry VIII.; 31st of January, 2d James I.; and 15th of August, 5th Charles I.; and by Acts of Parliament, of the 5th and 32d Henry VIII. and 18th George II.

But as all these rights and exemptions were fully confirmed and established by the Act of the 18th George II.; it is thought unnecessary to enumerate any of the earlier authorities; and that it will be sufficient to state, that by the Act of 18th George II. it was enacted, "That the Company of Surgeons, made and incorporated by that Act, and their successors, and all such who then had been, or thereafter should be, examined and approved, pursuant to the rules of the said Company, should be entitled to practise freely, and without restraint, the Art and Science of Surgery, throughout all and every His Majesty's dominions, any law or custom to the contrary notwithstanding."—"And it was further enacted, that all and every the Freemen of the said Corporation, and who had been, or thereafter should be, examined and approved, pursuant to the rules and orders of the said Company, and every of them, for so long a time as they should use and exer-

And it is our further will and pleasure, that the College of Surgeons hereby established, shall be liable to, and shall perform, such duties as the late dissolved Corporation of Surgeons was at any time heretofore liable to, and did perform, by virtue of an Act made in the 25th year of the reign of our Royal Grandfather, King George II. intitled, "An Act for the better preventing the horrid Crime of Murder."

And further We will, that the said College shall, and by these Presents they are required to purchase or provide a proper room, house, or building, with suitable conveniences, within four hundred yards, at the farthest, from the usual place of execution for the County of Middlesex, or the City of London, and the suburbs thereof; for the purpose of more conveniently dissecting and anatomizing the bodies of such murderers as shall at any time hereafter be delivered to them, by virtue of the last mentioned Act.

And it is our further will and pleasure, that it shall and may be lawful to and for the said College, hereby established and incorporated, from time to time, in the manner hereinafter mentioned, to elect, chuse, and appoint, twenty-one persons to be the Court of Assistants of the said College; of which Court of Assistants ten persons shall at all times be constituted and appointed Examiners of Surgeons for the said College; and of such ten persons one shall be principal Master, and two others shall be Governors; to be respectively qualified and admitted in such manner, and to continue in the said offices respectively, for such time or times as by these our Letters Patent is hereinafter ordered and appointed. And it shall and may be lawful for the Master and Governors of the said College, or for one of them, together with ten or more of the members of the said Court of Assistants for the time being, when and as often as to any one of the master or governors shall seem meet, to hold courts and assemblies, in order to treat and consult about, and concerning, the rule, order, state, and government of the said College. And also that it shall and may be lawful to and for the said Master and Governors, and Court of Assistants, so assembled, or the major part of them, to make, ordain, confirm, annul, or revoke, from time to time, such bye-laws, ordinances, rules, and constitutions, as to them shall seem requisite and convenient, for the regulation, government, and advantage of the said College; so as such bye-laws, ordinances, rules, and constitutions, be not contrary to law; and, in all such cases as shall be necessary, be examined, approved of, and allowed, as by the laws and statutes of this realm is provided and required: and also to transact

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cise the Art or Science of Surgery, and no longer, should and might, at all times thereafter, be freed and exempted from the several offices of constable, scavenger, overseer of the poor, and all other parish, ward, and leet offices; and of and from the being put into, or serving upon, any jury or inquest."

and ordain all such other matters and things as the Master, Governors, and Court of Assistants, of the late dissolved Company or Corporation of the Master, Governors, and Commonalty of the Art and Science of Surgeons of London, might heretofore lawfully do, transact, or ordain.

And further We will, that Charles Hawkins, Esquire, one of our principal Serjeant Surgeons, shall be and he is hereby constituted and appointed the first Master of the said College of Surgeons: and that William Long and George Chandler, Esquires, shall be, and they are hereby constituted and appointed the first Governors of the same; and that the said Charles Hawkins, William Long, and George Chandler, together with Joseph Warner, William Lucas, Samuel Howard, and William Cooper, Esquires, the said James Earle, Thomas Keate, Esquire, the Surgeon General to our Forces, and Charles Blicke, Esquire, shall be, and are hereby constituted and appointed the first Examiners of Surgeons for the said College. And also that the said Charles Hawkins, William Long, George Chandler, and Joseph Warner, Jonathan Wathen, Esquire; the said William Lucas, Samuel Howard, William Cooper, James Earle, and Charles Blicke, Thompson Forster, Esquire, John Birch, Esquire, the said Thomas Keate, John Heaviside, John Howard, William Blizard, and Henry Cline, Esquires, David Dundas, Esq. the other of our principal Serjeant Surgeons; and such three other persons as shall be elected to that office on the day whereon the Court of Assistants of the said College, hereby incorporated, shall first meet, after the date of these our Letters Patent, or at a Court of Assistants to be holden within one month then next after; shall be and they are hereby constituted the first Court of Assistants of the said College of Surgeons, hereby incorporated and established.

And it is our further will, that the said Master and Governors shall respectively hold and enjoy their said offices of Master and Governors from henceforth until the first Thursday in July next after the day of the date of these presents; and from thenceforth until a new election of a Master and Governors of the said Corporation shall take place, as is hereinafter expressed.

And We also will, that the said persons, so before named and constituted Examiners of Surgeons of the said College, and their successors in that office, duly chosen, nominated, or appointed, and that the said persons so before named and constituted Assistants of the said College, established by these our Letters Patent, and their successors in that office, duly chosen, nominated or appointed, shall respectively hold and enjoy their said offices during their natural lives, or until they shall be lawfully removed out of the said offices for any reasonable cause.

And it is our further will and pleasure, that the two principal Serjeant Surgeons to Us, and to our heirs and successors, and the Surgeon General to our forces, and to the forces of our heirs and successors, if they, or any of them, at the times of their appoint-

ments respectively, shall not be members of the Courts of Assistants and Examiners of the said College, shall be from time to time admitted members of the said Court of Assistants, and also Examiners of the said College hereby incorporated, when and so soon as any vacancy shall happen, from time to time, after the appointment of every such Serjeant Surgeon, or Surgeon General respectively, in preference to all other persons.

And further it is our will and pleasure, that the Master and Governors of the said College, hereby incorporated and established, or one of them, together with the Assistants of the said College, hereby nominated, or the major part of them, shall, within thirty days next after the date of these our Letters Patent, meet at such place at which the persons, members of the said late Corporation, shall have usually held their meetings, for the space of six months next before the day of the date of these presents, or at such other place within the Cities of London or Westminster, or within one mile of either of those Cities, as the Master or Governors, or any two of them, hereby constituted, shall in that behalf, by notice to be by them given and published in the London Gazette, fourteen days before the day of holding such meeting for that purpose, appoint; and shall then and there hold a Court of Assistants, for carrying into effect these our Letters Patent; and at such Court the said Master and Governors, Examiners and Assistants, or such of them as shall be then present, shall administer unto each other respectively, and each of them shall take the respective oaths following; that is to say, the said Master and Governors shall take the following oath:—"You do swear that, according to the best of your skill and knowledge, you will discharge the several trusts and powers vested in you as Master (or Governor, as the case may be) of the Royal College of Surgeons in London; and that you will diligently maintain the honour and welfare of the said College; and in all things, which shall in any sort concern your office, you will act faithfully and honestly, withour favor or affection, prejudice or partiality, to any person or persons whomsoever. —So help you God."

And that each of such Examiners and Assistants shall take the following oath; that is to say—"You do swear, that so long as you shall remain in the office of Examiner (or Assistant as the case may be) of the Royal College of Surgeons in London, you will diligently maintain the honor and welfare of the said College; and in all things relating to your office, and with all manner of persons, act equally and impartially, according to the best of your skill and knowledge.—So help you God."

And no person hereby appointed or hereafter to be elected Master, Governor, Examiner, or Assistant of the said College, hereby established and incorporated, shall proceed to act in the execution of such office, until he and they shall have taken the respective oath and oaths herein-before mentioned, which shall be

duly administered to them respectively, at a Court of Assistants to be holden in pursuance of these our Letters Patent.

And We further will, that the Master, Governors and Assistants, for the time being, of the said College, hereby made and established, shall, upon the first Thursday in the month of July next after the date of these our Letters Patent, or within one month then after, and upon the first Thursday in July in every succeeding year, or within one month then after, meet in the place which shall from time to time be used, or appointed to be used as their hall or council-house as conveniently may be; and then and there elect, chuse, and appoint out of the Examiners, by the majority of votes of such of the Court of Assistants as shall be then present, one person to be principal Master, and two other persons to be Governors of the said College for the then succeeding year; and then and there also, in like manner, chuse and appoint one or more of our principal Serjeant Surgeons, or the Surgeon General of our forces, if not already an Examiner or Examiners of Surgeons of the said College; or otherwise shall chuse and appoint out of their own body, some other person or persons, to be Examiner or Examiners of Surgeons for the same College, in the place and stead of such Examiner or Examiners as shall have happened to die, or have been removed from the said office of Examiner in the then next preceding year, unless such vacancies in the office of Master or Governor, and in that Court, shall have been previously filled up within the then preceding year, which it shall be lawful for the said Court of Assistants to do, at any Special Court to be held for that purpose. And also in like manner chuse and appoint out of the Members of the said College established by these Presents, some person or persons to be of the Court of Assistants of the same College, in the place of such person or persons who shall have happened to die in or have been removed from the said office of one of the Court of Assistants in the then next preceding year; unless such vacancies in that Court shall have been previously filled up within the then preceding year; which it shall be lawful for the said Court of Assistants to do, at a Special Court to be held for that purpose.

And it is our will and pleasure, that the Master, or one of the Governors, together with ten Assistants at the least, shall be at all times sufficient to constitute a Court of Assistants for the purpose of such elections, or for the purpose of transacting any other business belonging to the said Court. But that no Court of Assistants shall be holden for the special purpose of electing any person to be Master, Governor, Examiner, or Assistant, without seven days previous notice to be given for that purpose, by summons to the Members of the Court of Assistants for the time being.

And furthermore it is our will and pleasure, that if at any time or times hereafter, it shall happen that the Master and both the Governors of the said College hereby established, shall die, or be-

come incapable of acting before the election of a new Master and Governors, according to the provisions herein-before contained, that then, and in every such case, it shall and may be lawful for the senior Member of the Court of Assistants, who shall be capable of attending, to summon, convene, and hold a Court of Assistants, which may be held as soon as may be next after the death or incapacity of the last of such of them the said Master and Governors, who shall be so dead or incapable of acting; and that at such Court, a Master and Governors of the said College shall be elected for the remainder of the then current year; and that it shall and may be lawful for the senior Assistant of the said College who shall be then present, to preside at and hold such Court, and to administer to the new Master and Governors, who shall be then and there elected, the oath appointed to be taken by the Master and Governors of the said College as aforesaid, any thing herein contained to the contrary thereof notwithstanding. And in case it shall so happen that on the day appointed for the ordinary election of Master and Governors for the ensuing year, the Master and both the Governors shall be dead, or incapable of attending, the senior Member of the Court of Assistants, who shall be present at the Court of Assistants to be held for the purpose of such election, shall preside at, and hold such Court, and administer to the new Master and Governors, who shall then and there be elected, the oath appointed to be taken by the Master and Governors of the said College as aforesaid, any thing herein contained to the contrary notwithstanding. And in case it shall at any time happen, that the persons who shall assemble at the day and place appointed for any Court of Assistants to be holden in pursuance of these our Letters Patent, shall not be capable of holding such Court, by reason of the absence of any of the Members of the said Court whose presence shall be required for that purpose, it shall be lawful for the senior Member present to adjourn such Court to a future day, provided that no such adjournment shall be made until after the expiration of one hour, at the least, from the hour appointed for holding such Court.

And it is our further will and pleasure, that after the day of the date of these presents, no person, except those who before the day of the date of these presents were members of the late Corporation of Surgeons, established by the said Act, made and passed in the eighteenth year of the reign of our Royal Grandfather, King George II.; and also excepting such persons as shall have received such letters testimonial as aforesaid, under a seal purporting to be the seal of the late dissolved Company or Corporation of Surgeons, shall be capable of becoming a Member of the said College hereby established, unless he shall have obtained letters testimonial of his qualification to practice the Art and Science of Surgery, under the common seal of the College hereby established; but every person who shall hereafter obtain such letters testimonial, under the common seal of the College aforesaid, shall thereby, by

virtue of such letters testimonial, become and be constituted a Member of the said College, subject to all the regulations, provisions, and bye-laws of the said College.

And it is our further will and pleasure, that from and after such day on which the Court of Assistants of the College hereby established shall first meet, in the manner before-mentioned, the Examiners of the College of Surgeons hereby established, shall, and they are hereby required from time to time, upon request to them made by the Commander in Chief of our Forces, and by the Lord High Admiral or Commissioners for executing the office of Lord High Admiral, or any other officer of Us, our heirs or successors, properly authorised to examine every person who shall be a candidate to be appointed to serve as a Surgeon or Assistant Surgeon in any regiment, troop, company, hospital, or garrison of soldiers, in the service of Ourselves, our heirs or successors, or to serve as a Surgeon or Surgeon's Mate, appointed on board any ship or ships in the service of ourselves, our heirs or successors, or any other service in which We, our heirs or successors, shall think fit to employ any persons to act in any such capacities, and shall accept and receive for each such examination, from the persons so examined respectively, such fee or reward as shall from time to time be allowed by such officer or officers of Us, our heirs or successors, as shall be authorised to require such examinations, to be had respectively, and no more; and shall also in like manner examine all Surgeons' instruments to be used in our service, which they shall be required in like manner to examine, and shall return such instruments, when examined, to such person or persons as shall be appointed to receive the same, with such certificate, in such form, and properly sealed up, or otherwise authenticated in such manner as the officer or officers, from time to time, to be appointed by Us for such purposes, shall require; and taking for the same examination such fee or reward as shall be allowed from time to time by such our officer or officers respectively, and no more.

Provided always, that the fees or rewards from time to time to be appointed as aforesaid, for the examination of any such person or instruments as aforesaid, shall not be less than the fees or rewards heretofore paid for the like examinations respectively.

And further We will that no Court or Courts for the examination of any person or persons touching their skill in Surgery, shall ever be held but in the presence of the Master or one of the Governors, and five of the Members, at least, of the Court of Examiners of the said College, hereby established and incorporated as aforesaid.

And as it is our further will and pleasure, that the Members of the said late Corporation, and such other persons, who, since the dissolution thereof, shall have obtained such letters testimonial under a seal purporting to be the seal of the late dissolved Company or Corporation as aforesaid; and who shall be willing to become and be Members of the said College hereby established and

incorporated, shall testify their acceptance of these our Letters Patent, and their consent to become Members of the said College, by signifying such their acceptance and consent in writing to the Court of Assistants, within six calendar months after the date of these our Letters Patent, who shall cause such acceptance and consent to be entered in certain books to be kept for that purpose, at the Hall or Council House of the said College; and the said Court of Assistants are hereby required to keep such books, and have such entries made therein accordingly.

And it is our further will and pleasure, that such and so many of the members of the said late Corporation, and of such persons as shall have obtained such letters testimonial as aforesaid, as shall not, within the time aforesaid, signify in manner aforesaid their acceptance of these our Letters Patent, shall not be deemed or be Members of the said College, unless they shall be duly admitted to be Members thereof by the said Court of Assistants, upon special application made to them for that purpose.

Provided always, that if any of such persons shall happen to be beyond the seas at the date of these our Letters Patent, it shall be lawful for such persons respectively to signify their acceptance thereof, in manner aforesaid, within six calendar months after they shall return respectively to this kingdom.

Nevertheless it is our will and pleasure, that the Master, Governors, and Assistants of the College hereby established, and herein-before specially named and appointed, shall and may proceed to hold a Court for the purpose of carrying these our Letters Patent into execution, as aforesaid, without having testified their assent to, and acceptance of, such Letters Patent, by any writing, or by any entry to be made in manner aforesaid.—Witness His Majesty, at Westminster, the 22d day of March, in the fortieth year of his reign, by writ of Privy Seal.

WILMOT.

PART V.

MEDICAL AND PHYSICAL INTELLIGENCE.

Lecture x. *On Materia Medica and Pharmacy, at Apothecaries Hall.* By Professor Brande.

In this lecture Mr. B described the symptoms of calculous complaints, and discussed their treatment at some length.

Mr. B. conceives that 99 calculi of 100 which pass from the

kidneys are composed of uric acid. It occasionally happens that they are formed of oxalate of lime; and when the calculi voided are so formed, the return of such attack is not so liable as if of uric acid. Sometimes calculi increase in the kidney to so large a size as to form a complete cast of the pelvis, and ultimately to destroy the functions of the viscus, in which case one kidney appears sufficient to separate the urine from the blood.

Stones in the bladder are often formed by the introduction of an extraneous substance into that viscus, which acts as a nucleus. A stone was taken from a man in St. George's Hospital, where a pea was found the nucleus; in another a piece of a twig; a bullet has also been seen so placed. In one taken from a woman, a hazel nut was discovered. In all these cases the stone is entirely composed of the phosphates.

When red sand is voided, it is customary to exhibit alcaline medicines, which at first seldom fail to give considerable relief. After a time, however, they either disagree with the stomach to such an extent, as to render them improper, or the red sand and gravel return during their use, or the patient voids white sand. This last consists of the phosphates, and may at any time be produced by taking a large quantity of alcali, which, passing off by the kidneys, neutralises the excess of acid in the urine, and thus precipitates the earthy salts before held in solution. Where there is a stone in the bladder, this effect is often attributed to the action of the alcali upon it; but as caustic alcalies only act upon uric calculi, it is obvious that no solution of any part of them can ever be effected; for supposing the alcali even to remain caustic in the stomach, it would immediately become carbonated upon mixing with the urine. The alcalies therefore do not dissolve the uric acid when once formed, but they prevent its formation, probably, by acting upon the secretions of the stomach. The idea of solution of stone in the bladder is not supported by any fact.

Where the alcalies disagree, or are ineffectual, or have been persisted in too long, Mr. B. strongly advises the use of the common or carbonated magnesia, in the dose of from ten to twenty grains once or twice a day as required. This is as effectual as alcalies in preventing the increased formation of uric sand, and rarely disagrees with the stomach or produces dyspepsia. Where it purges, a little syrup of poppies or opium may be given with it: where it produces flatulence, some slight bitter will make it set easy upon the stomach. Mr. B. remarked, that from the nature of gouty concretions, and other circumstances, there could be no doubt respecting the connection of gout with stone; for, if the concretions, commonly called chalk stones, be examined, they are found composed of uric acid and soda; and if the secretion of uric acid be checked in persons so affected, it often increases the formation of chalk stones. That which checks uric acid has also diminished gout. Magnesia therefore would probably be very useful in that disease. In this idea he was partly justified by experience, but did

not wish to dwell more upon it, until he had had further opportunities of extending his observations.

Where patients void the white sand composed of the phosphates described in the last lecture, alcalies would do mischief; they then void more white sand. The acids are the remedies to be had recourse to. The presence of the phosphates is often detected, by a film on the urine, that comes on when it has been some time exposed to the air. Of the mineral acids, the muriatic is to be preferred; but the vegetable acids, and especially the citric, are preferable to all others, as less likely to induce irritation of the urinary canals. Twenty grains of the citric acid dissolved in any weak liquid has been found efficacious. Irritation of the bladder has been known to be produced on a man who was bottling off vinegar; but mineral acids have this effect in the greatest degree. Patients subject to this form of gravel, should most carefully avoid alcaline substances, and may indulge in a mild fruit and acid diet. Cyder may be the beverage, and the best wine is thin claret. If a small nucleus be already in the bladder, the growth of the stone may be prevented, by adhering to these rules; but, if there, it will not be dissolved.

It sometimes happens that the red or uric sand is voided, mixed with the white sand or phosphates, and the case then becomes very difficult to manage; for those medicines which check the formation of one variety are favourable to the increase of the other: dexterous management of magnesia and the acids will generally prove effectual. The former should be given at night, and the latter may be taken during the early part of the day. One advantage gained by this mode of treatment is, that the bowels become regular. A gentleman was cut for the stone, who voided this sand. Magnesia here increased white sand; but he got rid of the red. This state is sometimes connected with a diseased condition of the liver.

Drastic purges, by inducing too much fluid to the bowels, are generally injurious. But there is one case in which purging briskly may do good; that is, where a stone has passed from the bladder and is lodged in the urethra. A gentleman had introduced a bougie too far, and could not recover it. He took a strong dose of infusion of senna and salts. The violent action of the abdominal muscles and rectum, brought on by its operation, occasioned the ejection of the bougie with a kind of jerk.

The pain and irritation is not always in proportion to the size of the stone: thus surgeons are often mistaken, who attempt to form a judgment upon its size by the symptoms. A gentleman was even sounded for the stone, and its size pronounced considerable; yet when the operation was performed, and the bladder searched, no stone was to be found. But in withdrawing the forceps, a calculus of the size of a small pea was discovered adhering to that

instrument, which appeared to have been the cause of suffering; for he was perfectly relieved by the operation.

It will happen that a patient has suffered severely from the stone, and the pain is suddenly transferred to the stomach, where it excites violent vomitings; and such circumstance generally precedes death. These symptoms arise from a large stone pressing on the rectum, and acting, by sympathy, on the stomach.

Having stated it as his opinion, that a stone once formed in the bladder can never be dissolved by the internal use of medicines, and having mentioned the grounds of this opinion, Mr. B. shortly alluded to the use of solvent injections: but the bladder is never able to bear these of sufficient strength to operate even slightly upon the calculus. But if this were not the case, the alcalies become carbonated, and therefore, as far as *solution* is concerned, ineffectual, by mixing with the urine; and calculi are in the greater number of cases composed of different substances which would require different menstrua for their solution: and as the stones are hidden in the bladder, it may be considered as impossible to ascertain their composition.

Regarding it then as proved that a stone in the bladder can only be removed by operation, one question arises, which is of the utmost consequence to the suffering patient. This is, whether the surgeon should recommend an early operation, or delay it until the symptoms render it absolutely necessary? It is to be considered in regard to this question, that the chief danger of the operation, setting casualties aside, arises out of the size of the stone, and the diseased state of the parts produced by its long continued irritation. These sources of danger would be in a great measure avoided by removing the stone soon after it had passed into the bladder, and produced the symptoms characteristic of this malady.

Mr. Brande concluded this lecture by explaining the supposed cases of cure by solvent medicines, which, if the facts he had stated were correct, could never occur.

The disappearance of symptoms he referred to one of the following causes. 1. To the calculus burying itself between the muscular fasciculi of the bladder. 2. To the enlargement of the posterior lobe of the prostate gland, common in aged people, by which a barrier is formed between the stone and the orifice of the bladder, so that it ceases to irritate that part either in the act of making water, or in the different movements of the body, but lies in the posterior part of the bladder without producing any disturbance. 3. To the formation of several calculi, by which great pressure upon any one part is in a degree prevented, while rubbing upon one another they acquire a smooth surface, by which their growth is probably retarded. 4. To diminution of the sensibility of the parts, arising from some unknown cause.

In the next Lecture Mr. B. proposes noticing the functions of digestion and perspiration.

An Oration has been instituted, by the liberality of Dr. Baillie and Sir Everard Home, Bart. (who have each contributed £500,) commemorative of the late John Hunter. This Oration is to be delivered *in perpetuo* on the anniversary of the natal day of that celebrated Surgeon, (Feb. 14), at the Royal College of Surgeons.

The first Oration was delivered on Monday the 14th inst. before a most crouded auditory; among whom were Earl Spencer, the President of the Royal Society, Sir Archibald Macdonald, Right Hon. George Rose, Sir Francis Milman, Dr. Baillie, Sir Henry Halford, and many other distinguished members of the Sister College, Public Teachers, &c. Sir Everard Home, Master of the College of Surgeons, was the Orator.

Sir E. commenced by detailing the objects for which the Oration was instituted. He conceived himself highly honoured, that it should have devolved on him, while Master, to deliver the first oration; an office in which the two Governors, Sir William Blizard and Mr. Cline, were so eminently qualified to have preceded; but which, they both had joined in conferring on him.—He proceeded to notice the just distinction that had been made between Medicine and Surgery; and professed his conviction of the propriety of such distinction being preserved, as the only true means that would advance each to that degree of perfection of which it was capable. He then entered on a review of the merits of those Surgeons, who had rendered their names most celebrated since the erection of the Corporation.

To Wiseman, we were chiefly indebted as the first, who, by his works, gave a degree of importance to Surgery, which before it never possessed, and thus made the first step to raise it from an Art and Mystery, which it was before considered, to the rank of a Science. Before his time, Surgeons were mechanics. By his talents, and his conduct, he elevated the character of the Surgeon, and emancipated him from the wheels of the Physician's chariot, to which he was before enchained.

Cheselden's genius and superior attainments, which early in life acquired him fame and the highest honours of his profession, were forcibly commented on. To him, we were obliged for an admirable System of Anatomy, which the Author lived to see pass through six editions; and for a valuable work on Osteology. He became renowned above all his contemporaries by a new and more successful method of operating for the stone; while his penetration admirably elucidated the physiology of vision, by his philosophical observations on the well known case of the youth, on whom he successfully operated for congænital cataract. Cheselden's Theory of Vision, the Orator illustrated, by remarks deduced from his own experience.

Sir Cæsar Hawkins he mentioned, not from any work that he had left of the results of his practice, but because he was the inventor of the cutting Gorget for the operation for the stone: an instrument that had been universally approved, and adopted, as diminishing the danger of the operation, and which, except in

very young, or lean subjects, could not be so well performed by any other yet discovered.

Of the abilities, observations, and improvements introduced into the Art of Surgery by POTT, whose labours were continued through half of the last century, ample notice was taken. His works on Hernia, on Injuries of the Head, and on Fractures of the Limbs, were proofs of his talents and his industry. His reasoning on Fistula in Ano—his adoption of a simple operation, for one most painful and often hazardous, by the mere division of the rectum, and his invention of the curved Bistory for performing it, evinced the soundness of his judgment, the fertility of his resources, and his expertness as an operator.

Contemporary with POTT, though thirty years junior in practice, was JOHN HUNTER, who became a student of St. Bartholomew's Hospital in 1748. In a few years he removed to St. George's, where he pursued his studies with all that ardour and assiduity, that, even in his later years, so strongly marked a perfect devotion to his profession. During this period he assisted his brother, Dr. Wm. HUNTER, and contributed, by his ingenuity and indefatigable labours, to form that Museum, which was left by the Doctor to the University of Glasgow. About 1760 he received an appointment as Staff Surgeon in the Army. In 1763 he was elected Surgeon to St. George's Hospital; and in 1766 first commenced his Surgical Lectures.

His acuteness, his perseverance, his physiological experiments, his unbounded desire for research, which, not contented with the study of the human body, impelled him to extend his inquiries by comparative anatomy to the brute creation, were cursorily noticed.

The Orator then gave a succinct account of the discoveries of Mr. Hunter; modestly eulogising his character, talents, acquirements, and habits; and justly holding up his example as highly worthy of imitation by the junior part of his auditory. "He was employed from the rising to the setting of the Sun, and frequently continued the greater part of the night in these his favourite studies; and in making those invaluable anatomical preparations, that formed the Museum, which, by the munificence of the Legislature, now adorns this College."

Sir E. apologised for confining himself to this brief sketch of a man of whom so much might be said; but he was aware that others would succeed him in that chair, by whom, that, which he had omitted, would be well supplied. It was not his intention, he said, to draw comparisons. At this epoch there existed so many Members of that College, eminent for their abilities as Anatomists and Surgeons, and for their devotion to Science, that an attempt to assign pre-eminence where so many excelled, were vain. He congratulated himself that it was his good fortune to live in times when the Art of Surgery had advanced its claims to the highest consideration, and its Professors to be classed among the sons of Science. Yet, just as those claims were, he acknowledged that the Science of Medicine ought to rank the first in the healing

art; and that among the Members of the Royal College of Physicians were men of the greatest learning and erudition, possessing all the varied qualifications essential to the superior branch of the Profession.

The Orator's peroration was peculiarly dignified and impressive.

ROYAL SOCIETY.—January 30, a Paper by Sir Humphry Davy was read, intitled, Some Observations and Experiments on a New Substance, which becomes a Violet-coloured Gas by Heat. This substance was discovered, about two years ago, by M. Courtois, a manufacturer of salt-petre at Paris. The mode of obtaining it is easy. Concentrated sulphuric acid is poured upon the insoluble part of kelp, from which the soda has been extracted. Heat is produced, and the new substance appears under the form of violet vapour, which condenses into crystals.

LINNÆAN SOCIETY, January 18.—The remainder of Mr. Van Biberstein's paper on the Genus Serratula was read. Eighteen species were described; and fourteen of a new genus, under the name of *heterotrichum*, consisting of species removed from the genus Serratula, on account of the different structure of the pappus. At the same meeting, a notice by Mr. Sowerby was read, respecting the *Tremella Meteorica*, a gelatinous matter ranked among vegetable substances. Of the origin of this, and several other gelatinous substances, opinions are much at variance; and the object of Mr. Sowerby was to solicit information, whether they belong to the animal or vegetable creation.

A LETTER, addressed by Mr. Sharpe, Surgeon, of Hoxton, to their Royal Highnesses the Dukes of Kent and Sussex, in which the cure of Mrs. Lancaster and Moon, and the assertion respecting the fracture in the cranium of Harris, are stated neither of them to be founded in truth; has induced us to make some inqniries on the subject. To those inquiries we have received the following letter from a respectable Practitioner at Devizes, in which the case of Moon is fully elucidated:

"John Moon is at this time confined in a mad-house at Devizes, where he was sent by the overseers of the parish of North Bradley, in this county, on the 3d of August 1813, within ten or twelve days after his dismissal, a second time, from the house of Messrs. Delahoyde and Lucett.

"He appears to be in good bodily health, but his countenance, gestures, and language unequivocally indicate the most determined mania. He is habitually sullen, but occasionally breaks out into paroxysms of violent rage, and abuses in very intemperate terms some imagined enemies. His conversation is always hurried, desultory, and incoherent, yet occasionally his answers are sufficiently appropriate. He relates, for instance, with tolerable clearness, some of the particulars of the treatment he has undergone at Sion Vale; respecting which his account corresponds with popular report. He represents pretty distinctly that the up-

per part of his body was so placed as to receive a stream of cold water, while the lower half was immersed in hot water, and that on the following day, the process was reversed; that the lower extremities were plunged into cold water, while hot water was poured on the head and shoulders; and this treatment was often repeated.

"He is considered by the keeper of the madhouse (Richard Truman) as the most outrageous lunatic under his care, and requiring the constant employment of chains. It is affirmed, that he has exhibited no material increase or diminution of the symptoms of derangement since his admission.

"If there are other particulars of which you are in want of information regarding this man, or on any other subject that falls under my observation, you will oblige me by an intimation of your wishes. You are at perfect liberty to appropriate the whole or any part of the above letter to whatever purpose you think proper." R. H. BRABANT.

Devizes, Feb. 6, 1814.

NEW RUPTURE SOCIETY, instituted May 15, 1804, for the relief of both sexes afflicted with Hernia; Surgeon, WM. BLAIR, Esq. 69, Great Russel Street, Bloomsbury Square.—This Society will afford ample extension of its benefits to the army and navy, as soon as its funds shall prove adequate for that purpose; and it already includes within the sphere of its bounty a description of poor sufferers (namely, persons afflicted with PROLAPSES,) who have hitherto been left unprotected and forsaken. With a reference to this twofold object of its formation, it is named *The New Rupture Society, for the Relief of both Sexes afflicted with Herniary Complaints and Prolapses.*

The following comparative Statement, taken from an exact Register of *four thousand one hundred and seventeen* Patients relieved by the New Rupture Society, to November 1, 1813, will shew the proportion and species of herniary cases occurring in each sex:

		Males.	Females.
Ruptures	In both groins	915	18
	In both thighs	4	37
Inguinal	On the right side	1520	49
	On the left side	897	32
Femoral	On the right side	19	136
	On the left side	11	91
	Navel ruptures	29	175
	Ventral herniæ	3	13
	Intestinal prolapses	21	21
	Uterine prolapses	0	125
	Prolapse of the urinary bladder	0	1
		3419	698
			3419
	Total number of Cases		4117

It is difficult to ascertain at what age persons are most liable to become ruptured; probably, however, during the middle period of life: but, not fewer than one hundred and sixty of the above patients (nearly all males) were ruptured prior to their birth; about the proportion of a fifth of them had double inguinal herniæ; and one tenth had navel ruptures.

Of the females afflicted with prolapses of the bowel, sixteen had also uterine prolapses, seven were ruptured, and one had a prolapse of the urinary bladder. Many of the patients having ruptures in the navel, had at the same time inguinal or femoral herniæ; and two women had also prolapsus ani. A person who laboured under a venereal rupture, had likewise two inguinal herniæ. Several females, having prolapses of the uterus, had also herniæ on one or both sides. Four men had prolapses, with inguinal ruptures. Another male subject had one inguinal and two femoral ruptures, produced by sudden bodily exertion: and, in many men, hydrocele was combined with their ruptures.

Subscriptions for the use of this Society are received by the following Bankers: Messrs. Hoare, Fleet-street, Treasurers to this Institution; Hankey and Co. Fenchurch-street; Fuller, Chatteris, and Co. Lombard-street; Ransom and Co. Pall-mall; and by Mr. Crump, the Collector to this Society, No. 13, Judd-street, Brunswick-square; of whom may be had the printed Regulations, and a List of the Subscribers.

Medical Society of London.—The Anniversary Meeting of the Medical Society of London will be held at their House, in Bolt Court, on Tuesday the 8th of March; when the Officers and Council for the ensuing Year will be elected, and the Names of the successful Candidates for the Medals announced.—At half-past Three o'Clock, *precisely*, the Annual Oration will be delivered by Dr. George Rees, at the London Coffee-House, Ludgate-hill.

Effects of the Kamsin.—A caravan, (consisting of 2000 persons, merchants, travellers from the Red Sea and Persian Gulph, pilgrims, and military,) on its rout from Mecca to Aleppo, on the morning of the 23d of August, was overtaken by the *Kamsin*. This is described as setting in from N.E. with tremendous violence; dense clouds obscuring the horizon accompanied this gale, approached the columns of the caravan, and confused its line of march. Of the 2000 persons composing this caravan, the whole were destroyed except 20, who owed their safety to the extraordinary swiftness of their camels. The *Kamsin* is the wind described by Chardin under the term *Samy-el.*

Dr. Wollaston has invented an Instrument for freezing at a distance, called a Chryophorus, founded on the principle, that a fluid from which a portion is evaporated, becomes colder in consequence of the heat absorbed by that part which assumes the gaseous state; that fluids rise in a state of vapour at a lower temperature when the pressure of the atmosphere is removed, and consequently may be cooled to a lower degree by evaporation in vacuo than in the open air.

The University of Oxford have evinced their liberality and respect for extraordinary merit, by conferring the degree of Medicinæ Doctor, by diploma, on the celebrated Dr. Edward Jenner, the discoverer of Vaccination.

Dr. John Noble Johnson, of Magdalen Hall, and Dr. Edward Thomas Monro, of Oriel College, have been admitted by the University of Oxford to the Degree of M. D.

Dr. Clough's Winter Course of Lectures, advertised for the 24th of January, were unavoidably postponed to the 14th of February. 68, Berners Street.

Dr. Clarke's Lectures on Midwifery and the Diseases of Men and Children, will commence on Monday, March 21st, at the house of Mr. Clarke, No. 10, Upper John-street, Golden-square, where they are read every morning from a quarter past ten to a quarter past eleven, for the convenience of students attending the hospitals. For particulars apply to Dr. Clarke, New Burlington-street, or to Mr Clarke, at the Lecture Room.

Mr. A. T. Thomson will commence his usual Course of Lectures on Botany, comprehending Phytology and Systematic Botany, early in May next. The Lectures will be delivered in Mr. Brookes's Theatre, Blenheim-street. In a future Number, an abstract of the nature of the course will be given.

Dr. Squire will, on Tuesday the 22d of this month, begin a Course of Lectures on the Theory and Practice of Midwifery, and the Diseases of Women and Children.—Particulars may be known at Dr. Squire's house, Ely Place, Holborn.

Third Report *of the* London Committee *of* Apothecaries *and* Surgeon-Apothecaries *of* England *and* Wales.

The Resolutions of this Committee, of Sept. 4, 1813, which were proposed and published as the basis of a new Bill, were sent to each of the Chartered Medical Bodies.

On Oct. 29th ult. the Court of Assistants of the Society of Apothecaries passed a Resolution (No. I.), which was directed to Mr. Ward, Secretary to the Committee.

A note from Mr. Balfour, Secretary to the College of Surgeons, dated Oct. 11th ult. was also addressed to Mr. Ward, which merely acknowledged that the Memorial, and the Resolutions of Sept. 4th, had been received.

The Committee conceived it to be their duty to direct their Report, and the Resolutions before specified, to such Members of Parliament as had evinced an interest in the intended measure. In consequence, a communication took place between the Right Honourable George Rose and the Committee, the result of which was transmitted by Mr. Rose to the Executives of the Royal Colleges of Physicians and Surgeons; as was also a Resolution of the Committee (No. II.), dated Nov. 19th ult.

At this juncture, the Petition for leave to bring in a Bill was presented to the Hon. the House of Commons by J. Calcraft, Esq.

On the 2d inst. the Chairman (Mr. Burrows) was honoured with a note from Mr. Rose, inclosing a letter he had received from the President, with the Report of the Royal College of Physicians. (No. III.)

Upon this, the Committee ordered copies of the said letter and Report to be sent to the Masters of the Royal College of Surgeons and of the Society of Apothecaries, which they accompanied with a Resolution, dated the 7th inst. importing their readiness to confer with each of these Bodies on the subject of the Report. The note (No. IV.) has been since sent from the College of Surgeons.

The Court of Assistants of the Society of Apothecaries met on Thursday the 17th inst. and appointed a Committee of their Body to take into consideration these several papers; and a conference between the two Committees is to be held at Apothecaries Hall on Friday the 25th inst.

The Committee have embraced the earliest opportunity of laying these proceedings before the Medical Public; but refrain from offering any comment, while a measure of such importance is in the course of arrangement.

February 22d, 1814. G. M. Burrows, Chairman.

No. I.

Apothecaries' Hall, Oct. 29, 1813.

"Resolved, That this Court, after taking into consideration the Memorial* addressed to them from the Committee of the Society of Apothecaries and Surgeon-Apothecaries of England and Wales, together with the Reply of the Royal College of Physicians inclosed to their Memorial†, are of opinion, that this Court cannot enter into measures for any Improvement in Pharmacy, but in conjunction with that Learned Body." S. Backler, Clerk.

No. II.

Resolution of the General Committee, November 19, 1813.

Resolved, That this Committee determine not to apply for the formation of a fourth Medical Body for the purpose of Examinations, if the powers of the present Chartered Bodies can be so extended as to accomplish the objects which the printed resolutions of the 4th of September embrace.

The Committee will, therefore, be happy to confer with the Executives of the three Chartered Bodies upon the basis of the above statement, and, prior to that conference, would prepare a detail of such propositions as they conceive will be proper to form the Heads of a Bill. But as they conceive themselves to be deputed by, and acting for the Apothecaries and Surgeon-Apothecaries of England and Wales, they must reserve to themselves a right to make such proposals known to their constituents, before they are considered as giving a final assent.

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* See Appendix to the 2nd Report of Sept. 4, 1813, (No 26).
† See Ibid. (No. 22.)

No. III. (Copy)

Letter of Dr. Latham, President of the Royal College of Physicians, to the Right Honorable George Rose.

2, Harley Street, Jan. 27th, 1814.

Sir,—I have the honor of transmitting to you the Report of the Committee of the Royal College of Physicians, as laid before the College at the last Comitia, and am sincerely happy in the prospect afforded of matters being, at last, satisfactorily adjusted; for although the College did not agree with the Committee in one point, yet you will see it is a point not at all affecting the material provisions of the Bill. I have the honor to be, with great respect, Sir, your very obedient Servant, J. Latham.

January 25th, 1814.

Copy of the Report of the Committee appointed to take into consideration the papers relative to the Bill intended to be framed and brought into Parliament by the London Committee of Apothecaries, addressed by the Right Hon. George Rose to the President of the Royal College of Physicians, and by him submitted to the last Comitia Majora held at the College.

The Committee having met, in pursuance of the Orders of the College, and having deliberated upon the papers referred to their attention, *unanimously* agreed to recommend the following resolution to the adoption of the College.

Resolved, That the President be empowered to inform the Right Hon. George Rose, that the Royal College of Physicians have no objection to the formation of a Bill to be brought into Parliament by the London Committee of Apothecaries, upon the basis of certain Resolutions published by the said Committee, and dated the 4th September, 1813, provided—the powers therein contained be vested in the Society of Apothecaries as established by the Charter of King James, and provided—the Bill, before it shall be brought into the House of Commons, be submitted to the consideration of the College of Physicians for their examination and approval.

This Report was received and approved by the College, with the exception of the 4th Resolution, viz.

"That no person acting or having acted as full Surgeon or Apothecary, in the Army or Navy, shall be liable to an examination, except as to his Qualification in Midwifry," the College requiring that all persons who have acted in any department of the Army or Navy as Medical Practitioners, should not thence derive any authority to practice, unless examined by the Constituted Bodies.

No. IV.

Royal College of Surgeons, Feb. 12, 1814.

Sir,—I am directed by the Master of this College to acknowledge the receipt of your Letter and Enclosures of the 8th instant, and to return you his thanks for the same.

I am, Sir, your most obedient Servant, Edm. Balfour, Sec.

Wm. T. Ward, Esq.

METEOROLOGICAL TABLE. (Kept at Derby.)

From JANUARY 21, to FEBRUARY 20, 1814.

M	D	Therm.		Barom.		Hyg.	Wind.	Rain.	Remarks, &c.
		Morn.	Day.						
	21	15	27	29	73	43	N		Snow
	22	23	30		90	58	N	70	Fallen in Snow
S	23	20	34		81	54	NW	01	Clouds, Snow
	24	25	33		83	62	N		Clear
	25	21	35		85	74	W		Clear
	26	31	36		45	18	SW	01	Dull, Thaw
	27	32	36		28	14	SW	03	Dull
	28	31	37		25	32	SW	13	Clear, Melted Snow
	29	31	34	28	32	4	NE	87	In Snow
S	30	30	36	29	12	28	W		Clear
	31	28	36		46	34	W	10	Clear
	1	27	34		91	42	W	12	Clear, Thawed Snow
	2	28	38		92	27	NW		Clouds, Dull
	3	20	33	30	00	56	N		Clear
	4	15	25		02	75	N		Clear
	5	23	35	29	80	42	SW	05	Small Snow
S	6	35	39		55	28	SW	19	Dull
	7	32	39		62	32	W	14	Cloudy
	8	33	42		44	24	W	25	Cloudy, Windy
	9	35	44		63	30	SW		Clouds
	10	37	46		90	28	S		Cloudy
	11	41	45		89	23	S		Dull
	12	39	46		92	25	SW	17	Cloudy
S	13	39	42		90	20	N	10	Dull, Misty
	14	38	37		96	24	NE	03	Misty
	15	30	37	30	10	45	NE		Clear
	16	31	38		10	44	NE		Clear
	17	29	35		26	53	W		Clouds
	18	25	38		21	48	W		Dull
	19	37	40		16	41	N		Cloudy
S	20	29	39		25	54	S		Clear

In January 1.85 fallen is Snow

Observations on Diseases at Derby.

During the severe and continued frost, which has made the last month so remarkable, the course of disease has offered but few variations.—A catarrh has prevailed nearly universally, which has been improperly called Influenza; but it has differed essentially from that disease, in not having followed the wide-spreading route which characterized the epidemics of 1782 and 1803. Indeed it has appeared not to have arisen from any specific contagion, but to have been the offspring of the peculiar intensity of the season. Some families indeed have been seised by it universally, so that none have escaped; but this has happened in too few instances to afford any ground for considering it as specific. In the generality of cases, it has put on the appearance of a common sneezing cold, requiring no medical treatment, and running its course in a few days; but, where severe, it has been true pneumonia, so that the majority of instances in which medicine has been required have been more allied to pneumonia than catarrh.—In young children, the pneumonic form has been very common; so that even an active antiphlogistic treatment has in some cases been unavailing.—Occasionally, the inflammatory symptoms have appeared, in the form of cynanche, lumbago, and hepatitis, and many cases of common synochus have occurred.—In two patients, in whom symptoms of the latter disease had existed for some weeks almost unnoticed, death suddenly took place under all the marks of low fever except delirium. Many old people have died of the prevailing catarrh, as also have patients in whom asthma was constitutional.—Consumptive cases too have been unable to resist the cold.—Since the return of the more open weather, although the nights have been frosty, the catarrh has nearly ceased, and the pneumonia continued in a mitigated form.

Feb. 20, 1814.

A METEOROLOGICAL JOURNAL,

From the 21st of January to the 20th of February, 1814,

KEPT AT RICHMOND, YORKSHIRE,

NW from London.

D.	Barometer. Max.	Barometer. Min.	Therm. Max	Therm. Min.	Rain Gage.	Winds.	Weather.
21	29 50	29 41	27	19		NW...	1 S. 2 Sh. of Sn.
22	29 58	29 56	29	25		WbN.NW...	1 3 4 Sn. 2 S.
23	29 55	29 50	31	26		NW...	1 Sh. of Sn. and S.
24	29 53	29 50	32	24		NW..	1 S. 3 Cy.
25	29 27	29 02	35	29		W.S b W.	1 S. 3 Cy.
26	28 92	28 80	37	30		SW..	1 Cy. 2 S.
27	28 75	28 72	36	29		Vble.	1 S.
28	28 75	28 45	37	31		SW.	1 S.
29	28 54	28 28	34	29		NE..	1 Sn.
30	28 84	28 71	33	27		NW..	1 S.
31	29 43	29 15	33	25		WbN..NW...	1 S.
1	29 46	29 44	33	25	Melted Snow.	WNW..	1 S.
2	29 65	29 63	36	25		NW..	1 S.
3	29 64	29 62	32	15		NW..	1 S.
4	29 65	29 43	30	23		NW. S.	1 S. 2 Cy.
5	29 30	29 04	38	34		SW...	1 Sn. 2 S.
6	29 02	28 99	38	30		SW...WbN...	1 Sh. of R. 2 S. & Sh of Sn
7	29 19	28 89	36	29		W..	1 S.
8	29 21	28 76	40	35		SE.. W...	1 S. & Sh. of R.
9	29 44	29 30	41	35	1 43	W..	1 S.
10	29 36	29 35	42	37		SW..	1 S.
11	29 43	29 36	48	36		SE..	1 M. 2 S. 3 Cy.
12	29 56	29 56	46	35		S.SE.	1 3 4 M. 2 S.
13	29 63	29 56	44	36	15	S.E.	1 M. 4 R.
14	29 79	29 77	38	31		NE.	1 M. 3 Cy.
15	29 84	29 83	36	32		NE..	1 Cy.
16	29 94	29 88	42	28		NE.E.	1 Cy.
17	29 99	29 87	36	28		SW.	1 S.
18	29 87	29 87	40	34		SW.WNW.	1 Cy. 4 Starlight
19	29 94	29 90	45	31		NE.	1 Sml. R. 2 S. 4 M.
20	29 90	29 88	41	30		SW.	1 S.

Observations on Diseases at Richmond.

The diseases of this month have been much the same as the last, only less in number; and sore throats have nearly disappeared. Five cases of typhus have occurred in one family, and have proved particularly tedious. It is eight weeks since the disease began in the first patient, and the rest were attacked from fourteen to twenty days after. The disease has not been communicated to any of the attendants or neighbours. The patients reside in a village in the Vale, three miles to the eastward of Richmond.

No. 3. Vol. I

A REGISTER of the DISEASES of LONDON between January 20th and February 19th, 1814, for the London Medical, Surgical, and Pharmaceutical Repository.

DISEASES.	DISTRICTS. 1 S. W.	2 S.	3 S. E.	4 E.	5 N. E.	6 N.	7 N. W.	8 W.	9 Surry side W	10 Surry side E.	11 Hamp Highg	No. of Cases.	Fatal.
Anasarca	4	1		2	1	5		1		1		15	
Ascites	2	1	7		2	4	1	1			1	19	3
Asthma	10	7	7	8	16	8	35	14	12		7	126	17
Acne			1			1	2	1		3		8	
Apoplexia	3	1	1		2	4	4	2	2	1	1	21	8
Aphtha lactentium	1				4	1	4	2			1	13	1
Amenorrhœa	7	1			4	4	2	1		1	2	22	
Asthenia	22	3	1	1	12		10		3	1	3	56	4
Abortio	2	2		4	1	3	5	2	1	1	2	23	1
Bronchitis acuta		2	2	3	1		1	4	3			16	2
——— chronica		1	6	5	12	2	2	2	8			30	1
Cancer				1		2	1					4	
Chlorosis	2		4				1	4	1		2	14	
Cholera			1	4	1	2	2	1	4		1	16	
Chorea	2								1			3	
Cephalalgia	5	3	5	5	1	9	7	7	8	3	2	55	
Colica		2	11	3	5	2	5	3	4	4		39	
Catarrhus	61	12	35	29	69	20	45	23	27	7	19	347	
Convulsio	1			3	1	6		4		3	2	20	3
Cynanche Tonsillaris	6	5	3	8	14	11	4	12	10	3	3	79	
——— maligna	1			2		4	2	2	1			12	
——— Trachealis	1	1			1			3		1		7	1
——— parotidea	3			2	2		1		2	4		14	
Diabetes				1		1						2	
Dysenteria	5	1	2		12		6	2	2			30	
Diarrhœa	15	9	8	10	6	23	15	21	16	1	2	126	1
Dyspnœa	2	3	4	6	11	5	5	4	5	1		44	1
Dyspepsia	6	4	10	15	9	7	10	16	7	3	8	95	
Dysuria	6			4	1	2	2	5				20	
Ecthyma	2						1			1		4	
Eczema	1				2		1		1	1		6	
Erythema papulatum	1		2		2					2		7	
Erysipelas	3	1		5	5	8	7	4	2	2	1	38	
Enteritis				3	1		3	2				9	2
Entrodynia				1			2		1		3	7	
Enuresis	1					1				1		3	
Epilepsia	2	1			1	1						5	
Febris remittens	13	4	11	3	10	15	6	8	6	2	8	86	
—— intermittens	3		1	1		7	3	1	3	2	2	23	
—— puerpera				2	1	2		2				7	2
Gastrodynia	16				4	4		4	2		3	33	
Hæmatemesis					1		1					2	
Hæmoptoe	6	6		2	7	1	1	1				24	
Hæmorrhois		2		1	4	5		3	4	5		24	
Hepatitis	1			7	4	2	3		2	9		28	2
Hysteria	4	1			7	4	3	4	1		2	26	
Hysteritis	1			1		1		1		1		5	
Hydrocephalus	6		1	1		4	1	1		2		16	9
Hydrothorax		1				5	1	2		1	1	11	4
Herpes	6	1		4	6	2	5	1	2	2	2	31	
Hypochondriasis					1	1	4	1	1		1	9	
Icterus			2	3	1		3	2	1	1	1	14	
Icthyosis	1											1	
Impetigo		1			1		4					6	
Ischuria	1	1		1	1		2					6	
Leucorrhœa	1			2	6		12	1	3	2	1	28	
Lithiasis								1		1		2	
Lepra		1				2		1				4	
Lichen	1				1							2	
Mania					2	5	7	1				15	8
Menorrhagia	9			3	4	1	9	3	2	3	2	36	
Miliaria					1	2						3	
Morbi Infantiles*	9	8		16	12	23	17	18	7	25	5	140	10
——— Biliosi	11	4	6	11	8	22	7	5	15	16	6	111	
Nephritis				1	1		1	3		1		7	
Obstipatio	3		1	2	14	14	9	1	2			46	
Ophthalmia	5	2	1	4	4	11	12	4	2	9	5	59	
Paralysis	1	1	5	5	3	1	1	1	2	2		22	2
Phthisis Pulmonalis	7	4	1	2	5	5	10	3	1	1	1	40	10
Pleurodyne					7				3			10	
Pertussis	14	4	6	1	5	21	9	4	7	3	4	78	2
Peritonitis				1	1		2	1				5	1
Phrenitis	5							2				7	1
Pneumonia	22	14	5	11	19	14	20	19	10	5	6	145	9
Podagra	2	3	2	2	8	1	2	4	2	1		27	
Porrigo larvalis	1		2		2	1	4					10	
——— scutulata			2		1			1	2			6	
——— favosa	3				1							4	
Psoriasis	15				1			2		1	2	21	
Purpura			1			1						2	
Pyrosis			1		1			1	1			4	
Rachitis							1					1	
Rheumatis. acut.	21	8	3	5	19	10	8	4	6		1	85	
——— chron.	16	8	17		21	6	30	6	12	1	7	124	
Rubeola	6	4		1		1	1	1	2	2		18	1
Scabies	1	10			13	10	30		3	1	3	72	
Scarlatina simplex	1	3				4	9	1	2			20	
——— anginosa	1					1	1	2		2		7	
——— maligna	1					3						4	1
Synochus		2			3							5	
Scrofula		1	4		2	4	1	1	2		2	17	
Tabes Mesenterica	1	1						2		1		5	2
Typhus					1	2	3					6	
Variola		2				4	2		1	2		11	2
Varicella		2		1			2	1	2		4	12	
Vermes	2	8		1	1	2	10	3	1	3	3	34	
Vertigo	1	1	6	1	3	1	6	3	3	2		27	
Urticaria	3			2	2	1	2		1	1		12	
Total No. of Cases												3046	—
Total of Deaths													106

* *Morbi Infantiles* is meant to comprise those Disorders principally arising from dentition, and which may be too trivial to enter under any distinct head; *Morbi Biliosi*, such Complaints as are popularly termed *bilious*; but cannot be accurately classed.

*** *To render the Returns of Diseases full and complete, and with as little trouble as possible to Practitioners who will honour them with their assistance, the Editors will be happy to present printed Tables to any respectable individual who applies for them, and is willing to keep and return a Monthly Register of Cases occurring in his public or private practice. The returned Registers should be sent to Mr.* BURROWS, *Bloomsbury Square, between the 20th and 23d of every month.*—☞ It is particularly requested that the fatal termination of any disease be carefully noted in the column for Deaths. The EDITORS will also be infinitely obliged to their Reporters, if, on the backs of their Registers, they will briefly notice any thing remarkable in the Cases, or in the remedies applied. Any suggestions [illegible]

AN ABSTRACT from the REGISTER of those DISEASES of LONDON, presumed to originate in, or be influenced by, the State of the ATMOSPHERE, with a DIURNAL REFERENCE to the METEOROLOGICAL TABLE.

METEOROLOGICAL TABLE,

From the 20th of JANUARY 1813, to the 19th of FEBRUARY 1814.

M.	Therm.	Barom.		Hygrom. Dry.	Hygrom. Damp.	Winds.	Atmos. Variation.	D.
	32 33 30	29^{5}	8		20	NE..	Snow..F..F..	20
●	22 28 26	29^{7}	3		21 20	W.NW.	Snow...F..F.	21
	25 26 25	29^{7}	9		21 20	NW.	Fog..F.C..	22
	26 29 30	29^{8}	8		19 20 21	NW..	C...F...Snow.	23
	29 30 29	29^{8}			21 20	NW..	C...Snow...F.	24
	30 30 29	29^{9}	8		20 20 19	NW.W.	C...C..C.	25
	34 39 37	29^{6}	5		23	SW..	Snow.R.R.	26
	36 40 38	29^{3}	2		24	SW..	C....C...R.R.. in N	27
◐	37 38 35	29^{2}	3		26 25 25	W..	R.R.C..F..R.. in N	28
	35 41 35	28^{8}	28^{3}		27 26	se..s..nw...	Snow..R..R..	29
	32 36 32	29	29^{8}		23 20	NW..	F...F...F....	30
	30 35 35	29^{9}	5		23 20 22	W..NW..	F...F....Snow..	31
	31 35 33	29^{8}	30		21 20 19	NW...	F...F...F....R..in N	1
	35 36 32	29^{9}	30		26 24 22	W..NW..	R.F..F..	2
	30 33 30	30			23	NW..	C..F...F....	3
○	25 32 30	30	30^{2}		22 20 19	E..	C..F..F...	4
	30 35 36	30^{1}	29^{9}		20 21 23	SW..	C....C...Snow.R..	5
	40 38 36	29^{7}	6		26 24	W..	C....C...C..	6
	37 41 38	29^{6}	29^{7}		26 22	NW...	R.F..C..F...R..in N	7
	41 45 43	29^{4}	29^{5}		27 25 24	SW...	R.F..C..F..	8
	41 46 44	29^{1}	9		25 23	W..	C...F..C..	9
	44 48 45	30			27	W..	C...F..C...	10
◑	45 49 44	30			25 24 22	SW..	C...F...F...	11
	44 50 46	30			34 23	E..SE..	C...F...C..	12
	45 48 45	30	29^{8}		22 18 23	S..	C..C..R.R.. in N	13
	42 41 38	29^{9}	30		24 23 22	SE..	C....C..C..	14
	38 36 32	30^{2}	1		22 20	E...	F...F...F...	15
	32 36 33	30^{1}	4		15 16 18	E...	C..F..F...	16
	32 33 30	30^{4}			19 17 15	E..	C..C..F..	17
	24 37 38	30^{4}	2		15 17 18	SW..	F..F...C..R.	18
	38 36 34	30^{2}	4		17 18 19	N..	C.C..C...	19

Princes Street, Cavendish Square.

D.	Asthma.	Apoplexia.	Bronchitis.	Cholera.	Cephalalgia.	Colica.	Catarrhus.	Cynanche.	Cynanche Trachealis.	Dysenteria.	Diarrhœa.	Dyspnœa.	Erysipelas.
20	8	2	3	3	4	4	31	7	—	1	6	—	—
21	5	—	3	3	—	2	21	7	—	2	10	1	—
22	5	—	3	—	5	1	14	4	—	1	5	1	—
23	3	1	—	1	3	3	13	2	—	2	6	3	2
24	7	2	2	—	5	2	10	7	—	2	10	6	—
25	11	2	3	1	—	—	15	1	—	3	4	—	1
26	6	2	4	—	—	—	10	2	—	1	4	1	4
27	6	—	—	—	3	1	16	3	—	—	3	—	1
28	3	2	1	2	2	2	13	5	—	—	4	3	1
29	3	—	5	—	—	3	12	1	—	—	5	5	1
30	3	—	2	—	1	3	8	2	—	1	2	—	4
31	4	—	2	2	2	—	8	4	—	—	10	1	2
1	1	—	2	—	1	—	14	1	1	—	5	3	4
2	5	—	1	—	1	1	11	3	—	—	3	—	—
3	2	1	1	—	—	1	16	1	—	—	2	5	3
4	5	—	1	—	5	—	9	4	—	—	9	—	—
5	2	—	3	—	1	—	5	2	1	—	3	2	1
6	1	—	1	—	1	2	8	—	—	1	2	—	—
7	—	—	1	—	1	—	16	2	—	—	1	—	1
8	5	—	—	—	—	1	7	1	1	3	—	3	1
9	2	2	2	—	1	1	10	7	—	1	3	1	—
10	6	—	1	—	4	—	7	2	—	1	1	1	—
11	1	1	—	—	3	—	7	2	—	1	1	—	1
12	1	1	—	—	—	—	8	4	—	1	2	2	4
13	2	—	—	—	4	1	10	2	1	1	2	—	1
14	2	—	—	—	1	—	13	2	—	1	8	3	—
15	2	—	2	—	1	3	7	5	—	—	1	—	1
16	5	—	3	—	1	2	8	9	—	1	8	—	—
17	11	2	3	—	3	2	10	3	1	3	1	2	1
18	4	1	2	—	2	3	6	6	1	1	2	1	1
19	5	2	3	—	—	1	4	4	1	1	3	—	3
No. of Cases...	126	21	51	16	55	39	347	105	7	30	126	44	38
Fatal...........	17	8	3	—	—	—	—	—	1	—	1	1	—

D.	Febres.	Hæmoptoe.	Morbi Biliosi.	Ophthalmia.	Paralysis.	Phthisis.	Pertussis.	Pneumonia.	Podagra.	Purpura.	Rheumatismus.	Rubeola.	Scarlatina.	Typhus.	Variola.	Varicella.	Vertigo.	Urticaria.
20	3	2	7	—	1	1	6	4	—	—	15	1	1	—	1	—	3	—
21	6	—	4	1	2	1	7	3	2	—	14	2	3	—	—	—	—	—
22	2	—	7	3	—	4	10	6	—	—	16	—	—	—	—	—	—	—
23	8	2	3	2	2	1	12	5	1	—	7	—	4	1	—	—	—	—
24	5	2	8	4	1	2	2	8	—	—	9	—	—	—	1	—	2	1
25	4	2	4	4	—	3	4	9	—	—	13	—	—	—	—	—	—	1
26	4	—	8	1	2	2	5	6	—	—	1	—	—	1	—	—	—	—
27	1	2	4	—	3	3	1	2	2	—	12	3	—	1	—	—	2	2
28	8	—	3	2	3	—	—	7	2	1	6	—	5	—	1	1	2	—
29	5	—	7	2	1	1	—	5	1	—	5	—	—	—	—	1	—	—
30	4	—	6	3	—	2	2	3	2	—	7	—	2	—	—	—	1	—
31	3	1	2	1	—	4	1	—	—	—	4	—	—	—	—	—	3	1
1	6	1	4	1	1	—	—	6	—	—	7	—	2	—	—	—	2	2
2	1	—	5	1	—	—	2	6	1	—	4	—	1	1	—	—	3	1
3	4	—	2	—	—	—	2	7	1	—	6	3	1	—	—	—	—	—
4	3	2	2	2	1	1	5	3	3	—	4	2	1	—	1	—	1	—
5	4	—	1	1	—	1	1	2	2	—	10	2	—	—	—	—	—	—
6	—	—	3	4	—	1	1	2	2	—	6	—	—	1	—	—	—	—
7	4	—	2	—	—	3	3	5	—	—	6	—	1	—	—	3	—	1
8	3	1	2	4	—	2	—	8	1	—	4	—	1	—	1	—	—	—
9	2	2	2	3	1	—	2	3	—	—	4	—	—	—	—	3	3	—
10	3	—	2	3	1	2	—	5	2	—	7	—	1	—	—	—	—	1
11	1	2	—	2	—	—	4	3	—	—	6	2	5	1	1	—	1	—
12	6	—	1	2	—	2	2	4	1	—	8	1	1	—	—	—	—	1
13	4	—	1	—	1	1	—	3	1	—	3	—	—	—	—	—	1	—
14	3	—	3	2	2	1	1	4	—	—	7	—	—	—	2	1	2	—
15	4	2	3	6	—	2	—	4	2	—	5	—	—	—	2	2	—	—
16	4	1	4	—	—	—	1	5	1	1	8	—	—	—	1	—	—	—
17	2	—	6	3	—	—	2	9	—	—	3	—	1	—	—	—	—	1
18	4	1	2	—	—	—	2	2	—	—	1	2	1	—	—	1	1	—
19	5	1	3	2	—	—	—	6	—	—	2	—	—	—	—	—	—	—
No. of Cases	116	24	111	59	22	40	78	145	27	2	209	18	31	6	11	12	27	1[illegible]
Fatal	2	—	—	—	2	10	2	9	—	—	—	1	1	—	2	—	—	—

Total of Cases,...1958. Total of Deaths,...60.

Quantity of Rain, from Jan. 20th to February 19, one inch and 18-100ths.

BILL OF MORTALITY, *from January 18th to February 15th, 1814.*

CHRISTENED.

	Jan. 18-25.	Feb. 1.	Feb. 8.	Feb. 15.	Total.
Males.........	145	144	159	164	
Females......	140	146	121	162	
	285	290	280	326	1179
Decrease.........					301

BURIED.

	Jan. 18-25.	Feb. 1.	Feb. 8.	Feb. 15.	Total
Males.........	286	232	200	249	
Females......	217	240	221	266	
	503	472	421	515	1911
Increase.........					49[illegible]

OF WHOM HAVE DIED,

	Jan. 18-25.	Feb. 1.	Feb. 8.	Feb. 15.	
Under 2 yrs...	124	119	97	119	
Betw. 2 & 5...	42	43	52	50	
5 & 10...	10	18	7	9	
10 & 20...	11	13	9	14	
20 & 30...	25	27	22	27	
30 & 40...	36	42	38	38	
Betw. 40 & 50...	71	48	55	48	
50 & 60...	50	55	43	73	
60 & 70...	63	49	46	68	
70 & 80...	50	45	47	45	
80 & 90...	17	12	19	23	
90 & 100...	3	3	6	1	
Small Pox....	10	16	19	6	Total..51
Measles............	5	7	7	2	Total 21

ERRATA in No. II.—Christened 1513, instead of 1480.——Buried 1480, instead of 1513.

ON the 26th of January a thaw began after a long and severe frost, and continued to the 29th, when the frost returned with consid rable intensity; and remained till the 5th of February. On the 4th of February, the Thames was passable on the ice. in various points, between Blackfriars and London Bridges. On the 31st of January, several adventurous persons of light weight had passed over the river at the points before mentioned; and from that period to the 4th of February, thousands of persons were seen moving on the ice between London and Blackfriars Bridges. Nearly opposite to Queenhithe, about thirty booths were erected upon the river for the sale of refreshments. These booths extended almost down to London Bridge; under the centre arch of which many spectators at times stationed themselves to view this novel scene.

The Bill of Mortality decidedly marks the influence of the intense cold of the season on the human constitution. In London, above 400 more have died in the last than in the preceding month. To children under 5 years it has been very fatal; thence to 30 and 40 its influence has been less injurious. Youth and maturity have best resisted its effects. But at the last period, (40 years of age,) the increase of mortality commences, till at 90 and 100 it is augmented nearly in the proportion of 3 to 1. A singular fact, connected with the increase of mortality in aged persons, from the intensity of the winter, has been transmitted to us. In the small town of Hexham, in Northumberland, three persons died on successive days, whose ages together amounted to 300 years. In the country there is reason to believe the mortality has been much greater than in the metropolis. But in the north of England the cold has been unprecedented. The rapid

Tyne has been covered with ice 20 inches thick; a circumstance unparalleled in the annals of Newcastle.

Asthma and Bronchitis have declined; Pneumonia and Catarrh have not increased in frequency, and certainly with symptoms less severe. Apoplexia has been particularly common and fatal. Many have fallen under its attacks who were thin and pale, and of very temperate habits. Cephalic affections generally have much prevailed. Cynanche, influenced by the variations of temperature, and by humidity during the thaw, has much increased. Dysenteria, Diarrhœa, and febrile complaints, have been very frequent. Pertussis is epidemic, and is rapidly extending. Hitherto it has not been distinguished by any thing peculiar in the symptoms. In the North, or 6th District, it has been remarkably prevalent, and began to be very rife soon after Christmas. It was ascertained in six families to have been introduced by children returning for their vacation from a large school, a few miles to the west of London. The hoop had not manifested itself previously to the dispersion of the scholars, and therefore it had been considered to be a species of Influenza. One case has occurred of Variola succeeding Vaccinia. We have information also of Small-pox having twice attacked the same person, after an interval of seventeen years. The first attack had left strong marks in the face to identify its character. The case of Icthyosis was in a girl about nine years of age, from India, but of European parents. The scales covered the shoulders, back, and all the extremities, and could be detached without much difficulty. She was in other respects healthy. Immersion in the warm bath was ordered; and pitch pills prescribed, commencing with gr. vj. three times a day.

Two of the cases of Psoriasis were of the species named by Willan, *palmaria*. No evident cause could be assigned; both the patients were females in that rank of life, which prevented the existence of any of the usually assigned causes: and both cases were of very long standing.

The case of Erythema was not simply of that species named *nodosum*, but a complication of it and E. papulatum. On the tibia, or fore-part of the legs, the patches were large and eliptical; but on the back of the neck and shoulders, they were studded with elevated papillæ less florid than the patches on which they rose.

In the case of Epilepsy noted in our last Report iijss grs. of nitrate of silver is now given as a dose. The fits still recur, but with longer intervals.

It was our intention in the present Number to have reviewed Dr. Watt's work on Chincough, and particularly to have noticed some opinions he has advanced in an Appendix on the increased fatality of Measles since the introduction of Vaccination. It is with a view to draw the attention of Practitioners to the investigation of so important a question, that we have given the returns of Deaths from Measles in the Bill of Mortality: we invite the attention of the Faculty to the subject, and shall be happy to receive and record their opinions. Our Review of Dr. Watt, the pressure of temporary matter compels us to postpone till next month, when it shall appear.

BOOKS IN, AND PREPARING FOR, THE PRESS.

Dr. Henry Herbert Southey has nearly ready for Publication, "Observations on Pulmonary Consumption," in one volume octavo.

Mr. Sawrey is preparing for Publication, The Morbid Anatomy of the Brain in Mania and Hydrophobia; with the Pathology of the two Diseases, and Experiments to ascertain the presence of Water in the Ventricles and Pericardium; collected from the Papers of the late Dr. Andrew Marshall, Lecturer on Anatomy in London; with a Biographical Sketch of his Life.

Mr. A. T. Thomson is preparing for the press a second edition of his Conspectus.

Dr. Burnett, late Physician and Inspector of Hospitals to the Mediterranean Fleet, has in the press a work, Part I. containing a practical account of the Mediterranean Fever, with cases and dissections; Part II. the History of Fever in the Fleet during 1810, 11, 12, 13, and of the Gibraltar and Carthagena Fevers.

Mr. Blair will shortly publish, Directions for the Management of Ruptures and Prolapses; including a familiar Description of these Maladies, and a comparative Account of more than Four Thousand Cases in both Sexes.

A work on the erroneous opinions usually entertained concerning hereditary Diseases, with remarks on attempts to reduce Cutaneous Complaints to classes and orders, and on the unnecessary revival of exploded Greek terms. By Dr. Adams.

Mr. Hodgson's Treatise on Aneurism, and Wounded Arteries, is nearly ready for publication.

Mr. Stewart has a Treatise on Uterine Hemorrhage forthcoming.

Dr. C. Badham, Physician to the Duke of Sussex, &c. has in the press, an Essay on those Diseases of the Chest which have their seat in the Mucous Membrane, Larynx, or Bronchea. To which will be added, some miscellaneous Medical Cases and Remarks. 8vo.

Dr. Carmichael Smyth will publish in this present month a Treatise on Hydrocephalus, or Dropsy of the Brain.

Monthly Prices of SUBSTANCES *employed in* PHARMACY.

(H signifies higher in price; L lower, since the last Report.)

		S.	D.
Acaciæ Gummi elect.	lb.	3	6
Acidum Citricum	-	28	0H
—— Benzoicum	-	6	4
—— Sulphuricum	P. lb.	0	7
—— Muriaticum	-	1	0
—— Nitricum	-	2	6
—— Aceticum	cong.	4	6H
Alcohol	M. lb.	5	0
Æther sulphuricus	-	10	6
—— rectificatus	-	12	0
Ærugo	lb.	7	0
Aloes spicatæ extractum	-	6	0
— vulgaris extractum	-	4	9
Althææ Radix	-	1	0
Alumen	-	0	5
Ammoniæ Murias	-	2	6
———— Carbonas	-	3	0
Amygdala dulcis	-	5	9
Ammoniacum (Gutt.)	-	7	0
——— (Commun.)	-	3	6H
Anthemidis Flores	-	2	3
Antimonium	-		
Antimonii Sulphuretum	-	1	0
Antimonium Tartarizatum	-	5	6
Arsenici Oxydum	-	1	0
Assafoetida Gummi-resina	-	7	6
Aurantii Cortex	-	3	6
Argenti Nitras	unc.	6	9
Balsamum Peruvianum	lb.	24	0
—— Tolutanum	-	16	0
Benzoinum elect.	-	12	0
Calamina præparata	-	0	4
Calumbæ Radix	-	3	0
Cambogia	-	9	6
Camphora	-	10	0
Canellæ Cortex	-	3	6

		S.	D.
Cardamomi Semina opt.	lb.	14	0
Cascarillæ Cortex	-	6	6
Castoreum	unc.	4	6
Catechu Extractum	lb.	2	4
Cetaceum	-	3	0
Cera alba	-	3	6L
—— flava	-	3	0
Cinchonæ cordifoliæ Cortex (yellow)		8	6
—— lancifoliæ Cortex (quilled)		10	6
—— oblongifoliæ Cortex (red)		16	0
Cinnamomi Cortex	-	16	0
Coccus (Coccinella)	unc.	4	6
Colocynthidis Pulpæ	M.	8	0
Copaiba	-	7	6
Colchici Radix	-	3	6
Croci stigmata	unc.	4	0
Cupri sulphas	lb.	1	0
Cuprum ammoniatum	-	12	0
Cuspariæ Cortex	-	4	0
Confectio aromatica	-	10	0
—— Aurantii	-	5	0
—— Opii	-	5	0
—— Rosæ Canini	-	3	0
—— Rosæ Gallicæ	-	2	3L
—— Sennæ	-	1	8
Emplastrum Lyttæ	-	7	6
—— Hydrargyri	-	3	0
Extractum Cinchonæ	unc.	3	0
—— Cinchonæ resinos.	-	4	6
—— Colocynthidis	-	2	6
—— Colocynthidis comp.	-	1	3
—— Conii	-	0	6
—— Gentianæ	-	0	6
—— Glycyrrhizæ	lb.	3	6
—— Hæmatoxyli	unc.	0	6
—— Humuli	-	0	6

		S.	D.
Extractum Hyosciami	unc.	1	0
—— Jalapæ - 1s. 6d.	Res.	3	0
—— Opii	-	3	6
—— Papaveris	-	0	9
—— Rhæi	-	2	6
—— Sarsaparillæ	-	1	0
—— Taraxaci	-	0	6
Ferri carbonas	lb.	0	9
— sulphas	-	1	3
Ferrum ammoniatum	-	4	0
—— tartarizatum	-	4	6
Galbani Gum-resin.	-	8	0
Gentianæ Radix	-	1	0
Guaiaci Resina	-	6	6
Hydrargyrus purificatus	-	5	8
Hydrargyri Oxymurias	unc.	0	8
—— Submurias	-	0	9
—— Nitrico-Oxydum	-	0	8
—— Oxydum Cinereum	-	1	4
—— Oxydum rubrum	-	5	0
Hydrargyrus præcipitatus albus	-	0	9
Hydrargyri Sulphuretum rubrum	-	0	8
Hellebori nigri Radix	lb.	3	0
Ipecacuanhæ Radix	-	26	0
—— Pulvis	-	27	0 L
Jalapæ Radix	-	6	3
—— Pulvis	-	7	0
Kino	-	16	0
Liquor Plumbi Acetatis	M. lb.	1	4
— Ammoniæ	-	1	6
Linimentum Camphoræ comp.	-	6	0
Lichen Islandicus	lb.	1	10
Lyttæ	-	15	0
Magnesia	-	9	0
—— Carbonas	-	2	6
—— Sulphas	-	1	4
Manna optima	-	9	0 L
— communis	-	6	0
Moschus pod, 24s. in gr.	unc.	36	0
Mastiche	lb.	5	6
Myristicæ Nuclei	-	26	0H
Myrrha elect.	-	7	0
Olibanum	-	3	0
Opoponax	-	26	0
Opium (Turkey)	-	34	0
Opium (East India)	-	34	0
Oleum Amygdale	lb.	5	6
— Anisi	unc.	2	9
— Anthemidis	-	6	0
— Cinnamomi Cassia	-	8	0
— Caryophilli	-	6	0
— Cajuputi	-	6	6
— Carui	-	1	9
— Juniperi	-	4	0
— Lavendulæ	-	4	0
— Lini	cong.	9	0
— Menthæ piperitæ	unc.	4	6
— — viridis	-	2	0
— Olivæ	cong.	35	0H
— Olivæ secundum	-	21	0H
— Pimentæ	unc.	5	0
— Ricini optim.	(per bottle)	10	6
— Rosmarini	unc.	0	9
— Succini - 2s. 4d.	rect.	4	0
— Sulphuratum	M. lb.	1	6
— Terebinthinæ	-	2	3
— — rectificatum	-	2	9
Papaveris Capsulæ	(per 100)	2	6

		S.	D.
Plumbi Carbonas	lb.	0	8
— Superacetas	-	2	4
— Oxydum semi-vitreum	-	0	8
Potassa Fusa	unc.	0	9
— cum Calce	-	0	6
Potassæ Nitras	lb.	1	0
— Acetas	-	8	0
— Carbonas	-	1	0
— Supercarbonas	-	4	0
— Sulphas	-	1	0
— Sulphuretum	-	2	0
— Supersulphas	-	0	6
— Tartras	-	3	0
— Supertartras	-	2	0
Pilulæ Hydrargyri	unc.	0	9
Pulvis Antimonialis	-	0	8
Resina Flava	lb.	0	5
Rhæi Radix (Russia)	-	30	0H
—— (East India)	-	12	0
Rosæ Folia	-	10	6
Sapo (Spanish)	-	2	6
Sarsaparilla Radix	-	6	0
Scammoneæ Gum-Resina	unc.	2	6
Scillæ Radix siccat	lb.	5	6
Senegæ Radix	-	3	6
Sennæ Folia	-	6	6
Serpentariæ Radix	-	26	0L
Simaroubæ Cortex	-	4	6
Sodæ Boras	-	4	6H
— Sulphas	-	0	9H
— Carbonas	-	7	0
— Subcarbonas	-	1	6
— — exsiccata	-	4	0H
Soda tartarizata	-	2	6
Spongia usta	-	24	0
Spiritus Ammoniæ	M. lb.	4	0
—— —— aromaticus	-	4	0
—— —— fœtidus	-	4	0
—— —— succinatus	-	5	0
— Cinnamomi	-	2	8
— Lavendulæ	-	4	6
— Myristicæ	-	3	6
— Pimentæ	-	2	6
— Rosmarini	-	4	0
— Ætheris Aromaticus	-	5	6
— — Compositus	-	5	6
— — Nitrici	-	4	0
— — Sulphurici	-	6	6
— Vini rectificatus	cong.	28	0L
Syrupus Papaveris	lb.	2	0H
Sulphur	-	0	3
— Sublimatum	-	0	6
— Lotum	-	1	0
— Præcipitatum	-	1	0
Tamarindus opt.	-	2	6
Terebinthina Vulgaris	-	0	10
Terebinthina Canadensis	-	5	6
Terebinthina Chia	-	7	6L
Tragacantha Gummi	-	10	6
Valerianæ Radix	-	1	10
Veratri Radix	-	1	6
Unguentum Hydrargyri-fortius	-	5	6
—— —— Nitratis	-	2	8
—— —— Nitrico-oxy.		3	0
Uvæ Ursi Folia	-	2	6
Zinci Oxydum	-	5	6
— Sulphas purif.	-	2	6
Zingiberis Radix opt.	-	3	6H

Prices of New Phials per Gross.——8 oz. 70*s* —6 oz. 58*s*.—4 oz. 47*s*.—3 oz. 43*s*.—2 oz. and 1½ oz. 36*s*.—1 oz. 30*s*.—half oz. 24*s*.——The London Glassmen will allow 10 per Cent, ready money.—The Manufacturers in the Country, where all Phials are made, will allow 27½ discount, at three months credit, (carriage free,) to London.

Prices of second-hand Phials, cleaned, and sorted.——8 oz. 42*s*.—6 oz. 40*s*.—4 oz. 32*s*.—3 oz. 28*s*.—2 oz. and all below this size, 22*s*.—Three months credit.

Hirudines, 15*s*. per dozen at Covent Garden Market.

Foreign Leeches not being in general to be depended on, their prices are omitted.

MONTHLY CATALOGUE OF BOOKS.

Über den Ansteckenden Typhus, &c. A Treatise on the Contagion of Typhus. By I. W. Von Hildenbrand, Professor of Medicine at Vienna. 8vo. Imported by Callow.

Ausführliche Darstellung und Untersuchung der Selbstverbrennungen, &c. An Inquiry into the Spontaneous Combustion of the Human Body. By I. H. Kopp, M. D. 8vo. Imported by Callow.

Lectures on Comparative Anatomy, in which are explained the Preparations in the Hunterian Collection. By Sir Everard Home, Bart. F. R. S. Illustrated by Engravings. 2 large vols. 4to. G. and W. Nicol.

Surgical Observations on the Constitutional Origin and Treatment of Local Diseases, and on Aneurisms. By John Abernethy, F. R. S. &c. ongman and Co.

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Essays on the Theory of the Earth. Translated from the French of M. Cuvier. By Robert Kerr, F. R. S. and F. S. A. Edinb. Murray.

An Essay on Medical Economy, &c. Underwood.

Observations on the Distinguishing Symptoms of three different Species of Pulmonary Consumption, &c. &c. By Andrew Duncan, senior, M. D. Longman and Co.

Facts and Observations relative to the Fever, commonly called Puerperal. By John Armstrong, M. D. Longman and Co.

A Vindication of Natural Diet. 12mo. Callow.

INDEX INDICATORIUS.

Our grateful acknowledgments are due to Dr. Mills, *for a list of the diseases of* Dublin, *occurring in his practice during the last month; we regret that it came too late for insertion in the present, but it shall certainly appear in the next Number; and we trust the* Doctor *will continue to furnish us regularly with so interesting a diary.*

We promise ourselves the gratification of publishing next month a quarterly Report of the diseases of the children in Christ's Hospital, *with which we are favoured by the friendship of* Mr. Field.

Communications are likewise received from Professor Carlisle, Messrs. Vise, Hobson, Croker, Semple, S. Y. A Westminster Practitioner, *&c. &c.*

The queries of our Borough Friend will be duly noticed.—Mr. Bartlett, *of Great Bedwin, will accept our thanks for his polite attention: we shall not fail to avail ourselves of his information.*

The Memoir on Medical Reform, or Reformists, *is come to hand; but, for the prudential reason with which the* Report of the London Committee *concludes* (see p. 265), *we must, for the present at least, decline inserting that, and every other, observation tending to excite invidious distinctions and prejudices. To the second part of the Memoir, which the Writer promises, perhaps the same objections will not arise. Any proposal or hint that may assist the parties now discussing this momentous question, either in arrangement or detail, we shall think it our duty, as it is our inclination, to be the medium of promulgating. The Writer may be assured, that no* personal *motive influences our decision.*

We lament that our Dublin Subscribers have not yet received the Repository. *This is to be attributed to the extreme severity of the weather, which has impeded the common channels of commercial intercourse. We have already hinted, that, by applying to their Booksellers in Dublin, they may have the Number regularly transmitted by the Post, at a very trifling additional expence.*

To the different Medical Societies *who have honoured us with the expression of their thanks for the First Number of the* Repository, *and with their orders to be supplied with it in future, we are much indebted. If there be any of those Societies in the kingdom that we have neglected, we entreat that the omission may be imputed to its right cause—an unacquaintance with their existence.*

Communications intended for insertion in the subsequent Number, should reach us before the 12th of the month. They are respectfully solicited, and should be addressed (free of expence) to Mr. Burrows, *Bloomsbury Square: by whom Books for the Review Department, Articles of Intelligence, &c. &c. will also be received.*